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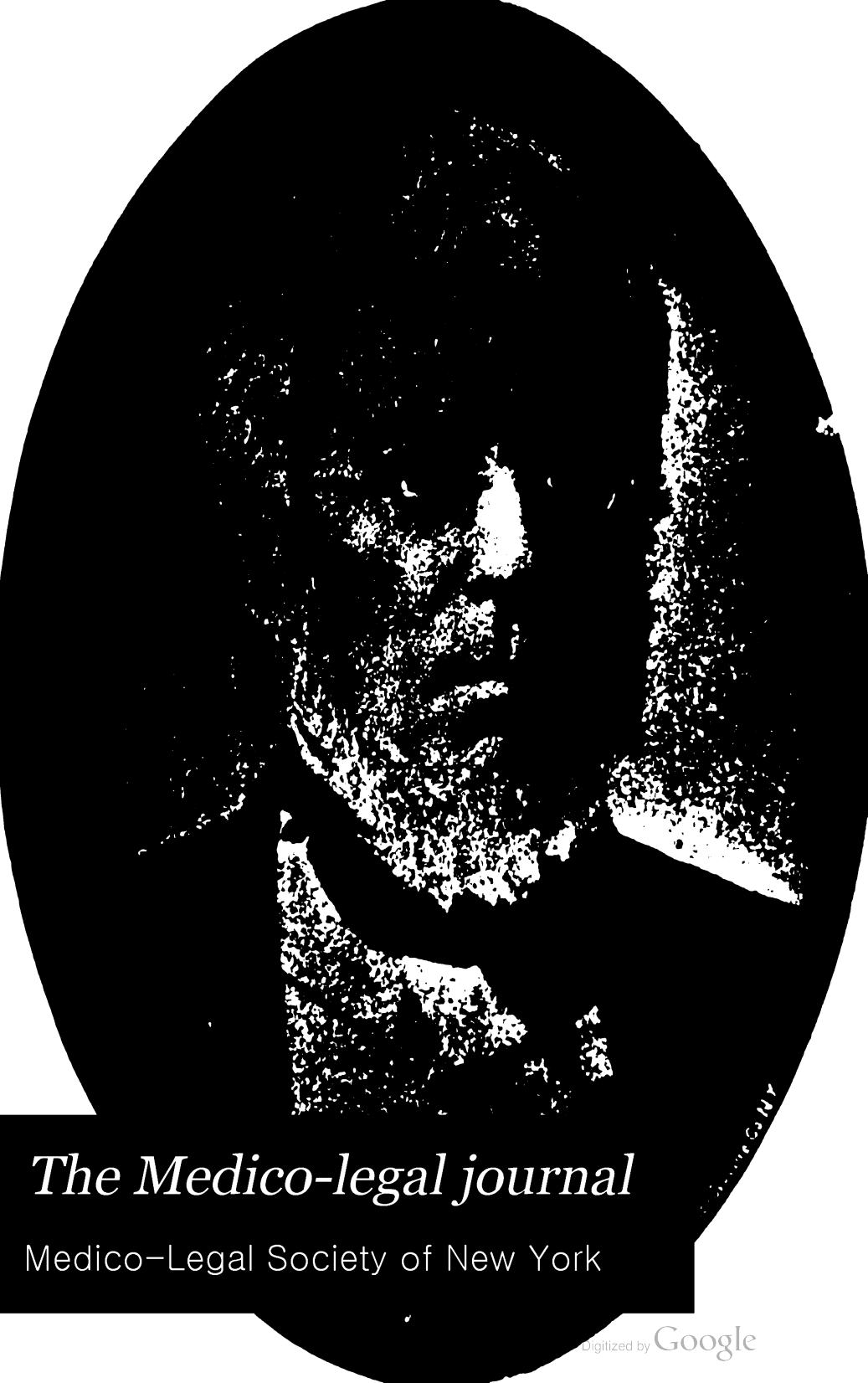

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Medico-Legal Society of New York

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A Quarterly devoted to the Science of Medical Jurisprudence,

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This Journal will publish the leading papers of the Medico-Legal Society, and a resume of its transactions. Its columns will at the same time be open to contributions from all sources and from all parts of the world, on appropriate subjects and questions. It will endeavor to chronicle interesting facts and scientific deductions within its domain, and keep a record of current events, especially in the trial of cases in the courts which involve Medico-Legal questions

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ISAAC RAY, M. D., L.L.D.

By Charles K. Mills, M. D.,

President of the American Neurological Association, etc.

At the Meeting of this Society held December 8, 1886, I had the honor to ask your attention to the consideration of the life and character of Dr. Benjamin Rush, and particularly to the relation which this great man bore to the early history of American Psychiatry. In a more recent period, but with an even greater renown in the field of, psychological medicine, appears the figure of Dr. Isaac Ray. It is my purpose in the present paper briefly, and I fear, very imperfectly, to recall his character and labors, and it is fitting that this should be done before a Medico-Legal Society, for to him, more than to any other American the science of the jurisprudence of insanity is a debtor.

Dr. Ray was born at Beverly, Mass., January 16, 1807. He began his education at the Phillips Academy, Andover, Mass., and subsequently entered the Bowdoin College in Maine, teaching school during his vacations. He left college because of impaired health before graduation.

Read before the Medico-Legal Society, of New York, April 13, 1887.

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Later, he studied medicine in Boston, graduated at the Harvard Medical School in 1827, and started in the practice of medicine in Portland, Me., the same year. In 1831, he married Miss Abigail May Frothingham. Dr. Kirkbride says that while a resident of Portland, he delivered a course of lectures on Botany, at one of which, he first met Miss Frothingham. (Many of the facts contained in this sketch have been obtained from an obituary on Dr. Ray, in the *American Journal of Insanity*, April, 1881, vol. XXXVII, page 481; and from a biographical sketch written by the late distinguished alienist, Dr. Thos. S. Kirkbride, and published in the *American Journal of the Medical Sciences*, N. S., Vol. LXXXII, 1881, page 284.)

He had two children, the first, a daughter, who died at the age of fourteen, the second, a son, Dr. B. Lincoln Ray, an accomplished writer and physician, who died somewhat suddenly, the shock of his death producing a serious effect upon Dr. Ray, who himself died not long afterwards.

I have chanced upon a work by Dr. Ray which does not seem to have been noticed by his other biographers. This is a little book entitled *Conversations on the Animal Economy*: designed for the Instruction of Youth and the Perusal of General Readers, Portland, 1829. This was probably his first professional literary effort of any importance. It is written in the form of a conversation between a doctor and a young girl. It is exceedingly well written, and forms an admirable elementary treatise on Physiology and allied topics. In the copyright notice of this book, occurs the following

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curious paragraph, quoted from Galen, which doubtless gives some insight into the character and feeling of Dr. Ray at that time :

"Conversations on the Animal Economy, Designed for the instruction of Youth and the Perusal of General Readers. By Isaac Ray, M. D.—'In explaining these things, I esteem myself as composing a solemn hymn to the Great Architect of our bodily frame, in which, I think there is more true piety, than in sacrificing hecatombs of oxen, or in burning the most costly perfumes."—(Galen,) Portland. Published by Shirling & Hyde, 1829.

In the advertisement or Introduction to the little book he speaks as follows :

"The increasing taste for the study of the Natural Sciences has created the necessity for an elementary work on the most interesting of them all, the science of Animal Economy, in which everything of a strictly professional nature, and whatever else would be improper for general readers, should be carefully excluded, and the whole rendered intelligible to the minds of the young and the unlearned. To meet this necessity has been the object of the author in the following sheets. To the merit of originality, he lays no pretentions ; but if the manner in which the subject is here treated, shall prove an inducement to acquire some useful and interesting knowledge concerning the noblest of the works of Nature, it is the only merit that it would claim. How far he has succeeded in accomplishing this object, is for instructors and common readers to say. Portland, May 11, 1829."

Dr. Ray removed to Eastport, Maine, about 1829. While here he became interested in the study of insanity. Some of the best portions of his book, *On the Animal Economy*, show the carefulness with which he studied elementary nervous and mental phenomena ; but circumstances which occurred in the trial of certain cases in the courts of Maine, according to Dr. Kirkbride, led him to undertake the preparation of his great work on the "*Medical Jurisprudence of Insanity*," which has passed through numerous editions.

In 1841, Dr. Ray was appointed Superintendent of the State Hospital for the Insane, at Augusta, Maine. In 1846,

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he was appointed Superintendent of the Butler Hospital, at Providence, Rhode Island. He visited Europe after his appointment, traveling through Great Britain, France and Germany, and making observations on the principal hospitals for the Insane in those countries. On his return, he gave his close personal attention to the building of the Butler Hospital, which was opened in 1847.

In the *American Journal of Insanity* for 1846, he published the results of his observations in Europe in an article of 101 pages, a valuable contribution to practical psychiatry, as the following list of the subjects considered by him shows: Metropolitan commission in lunacy; visiting justices, directors, governors, etc.; officers; compensation of officers; site of European asylums; grounds; architectural construction; sleeping rooms; day rooms; windows; floors; doors; associated dormitories; padded rooms; warming and ventilation; attendants; airing courts; quiet of the European asylums; restraint and non-restraint; labor; amusements and recreations; schools; noisy patients; medication; religious exercises; criminal lunatics, size of the institutions for the insane.

He continued as Superintendent of the Butler Hospital until 1867, when he resigned, because of ill health, and moved to Philadelphia, where he continued to reside until the time of his death. His health improved, and during his residence in Philadelphia he was frequently employed as an expert in insanity cases. He died March 31, 1881.

Dr. Ray was a member of many medical associations, and was one of the thirteen superintendents who, in

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1844, organized the Association of Medical Superintendents of American Institutions for the Insane. He was president of this Association from May, 1855, to May, 1859. In the College of Physicians, of Philadelphia, and in the Social Science Association, of which he was one of the projectors, he was an active and influential member. He was appointed one of the Guardians of the Poor of the City of Philadelphia, and gave especial attention to the Insane Department of the Philadelphia Hospital during his term of service.

In 1870 he was appointed Lecturer on Insanity in the Jefferson Medical College, of Philadelphia, and lectured in that institution during the spring sessions of 1870-'71, and '72. During the time that he was engaged in lecturing, and partly with the view of illustrating his lectures, Dr. D. D. Richardson, then Superintendent of the Insane Department of the Philadelphia Hospital, gave clinical demonstrations on insanity to medical students at the hospital. This, so far as I know, was the first instruction on insanity given in Philadelphia medical schools after the time of Rush.

In attempting to enumerate the chief ways in which the benign influence of Dr. Ray has been felt, I fear that I am more likely to render scant justice to his memory than to magnify his merits. To him we owe a Treatise on the Medical Jurisprudence of Insanity, which not only has never been rivalled nor approached in his own country, but has scarcely been surpassed in any other. At the time of the publication of the first edition of this great work (1838), he was a very young man, and a recent

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graduate in medicine. At that time the English language had not furnished a single work in which the various forms and degrees of mental derangement were treated in reference to their effects on the rights and duties of man; although in several publications the legal relations of the insane had been considered at greater or less length. His wonderful industry and profound knowledge of the literature of insanity are shown in the fact that in his treatise occur the following references to different authors and cases: British, 146; American, 145; French, 85; German, 35; Italian, 2.

The treatise is valuable, among other merits, for the manner in which he has brought to the attention of the English reading public the views of foreign authorities. It has been charged against the work, that it is largely a reproduction of the French and German, particularly the former, but this charge, does not hold good. While he has made use largely of the work of others, he has given due credit always, and has incorporated facts, observations and opinions of his own in large numbers. We owe him, indeed, a debt of gratitude for making us more familiar with the labors of Esquirol, Georget, Gall, Spurzheim, Pinel, Marc, Andral, Hoffbauer, Platner, Ethmuller, Henke, Friedreich and others, of France and of Germany; as, for instance, in that section of Chapter VII, in which he treats of partial monomania, where a most valuable collection of cases from these authors is, for the first time, brought together. His great fame then will rest upon his extraordinary merits and achievements as a medical jurist. Certainly no American, and

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few of any country, have approached him in this sphere.

Some of the chapters in the treatise on the Medical Jurisprudence of Insanity are especially worthy of commendation and admiration. The chapter of Preliminary Views is an admirable historical and critical study. Skilfully, and with the hand of a master both in literature and pyschology, is traced the history of the evolution of the criteria of responsibility. The differences between civil and criminal cases are well set forth; the weakness of the ordinary tests are shown; delusions and hallucinations are given their proper status; and, in short, Dr. Ray's review of the judicial opinions and practices which have prevailed, particularly in English speaking countries, is one that has not been equalled even in works of much larger size. The chapter is not merely a catalogue of cases, a dull record of decisions and opinions, but the dry bones of detail are clothed in the flesh and garments of a delightful style, and from within shines forth a spirit both critical, philosophical and mankind-loving.

His was a humanitarian spirit in the best acceptation of this term; but he was not as has been sometimes said one who saw in every criminal act a hidden insanity. Often he distinctly places side by side the features which enable us to discriminate between acts due to insane impulses and those which are the result of pure depravity or criminality; for example, he sharply differentiates homicidal insanity from murder criminally committed. His enumeration of the distinction of the two is

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sufficient to show the close study which he gavé to the subject. He points out that homicidal insanity is committed without sufficient motive, murder with motive, always as a means for accomplishing some selfish object; that the homicidal monomaniac testifies neither remorse, nor repentance, nor satisfaction, and if judicially condemned perhaps acknowledges the justice of the sentence, while the criminal either denies or confesses his guilt; that the criminal never sheds more blood than is necessary for his object, while the homicidal monomaniac sacrifices all within his reach; the criminal lays a plan, the homicidal monomaniac consults none of the usual conveniences of crime; the criminal flies, the homicidal monomaniac voluntarily surrenders himself, etc..

His discussion of the subject of Moral Mania, general and partial, is of great value, although he sometimes falls into error, including cases under this designation, which are better placed elsewhere. In making this criticism, however, it must be remembered that the advances in the differentiation of the different forms of insanity have been very great since the publication of the earlier editions of his Treatise. Under the head of General Moral Mania, he describes the disease now known as "circular insanity," but in a footnote to a late edition of his Treatise he tells us that since the description given in his text was written "this form of insanity has been described by Baillarger under the name of *Folie à double forme*, and by Falret under the name of *Folie circulaire*."

The following quotation illustrates the clear and log-

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ical manner in which he dealt with some of these higher problems of Medical Jurisprudence:

"But whether there may or may not be some small degree of intellectual disturbance in the class of cases referred to, is a question which, practically, is of trivial importance. The main truth will scarcely be denied, that the disturbance of the moral or affective powers is obvious and extensive, while that of the intellect is very slight at the most. The essential question is, not whether the intellect is impaired, but whether the affective powers are so deranged as to overpower any resistance made by the intellect. It is a matter of relative power, and hence it is quite immaterial whether the result proceeds from the impaired intellect, or irresistible activity of the affective powers. To say, in reply, that all crime proceeds from this inordinate force of the passions and propensities, overpowering the conscience and judgment is only to utter a truism entirely irrelevant to the real question at issue, which is, whether this predominance of the moral over the intellectual is, or is not the result of disease? A stronger objection consists in the difficulty of distinguishing sometimes between ordinary depravity and the impulses of disease—a difficulty we are not disposed to ignore. But the difficulty of drawing the line between two classes of phenomena does not prove, certainly, that there is no difference between them. Nature makes no dividing lines, and our divisions override one another at various points. But instead of rejecting all classification, we recognize the difficulty, and endeavor to obviate it by a larger knowledge and deeper insight. Under a mode of criminal procedure, which will permit a satisfactory observation of doubtful cases, we might not avoid all difficulty, but we should seldom commit a gross injustice. Objection has been taken to the name given to this form of mental disorder, and the aid of ridicule has been invoked to add new odium to a defence already viewed with suspicion and distrust. Among those even who admit the thing, are many who regret the name. There seems, however, to be no substantial reason for this objection. The division of the mental faculties into moral and intellectual, is very old and very well founded, and it seems natural and proper that the same names should be applied to their respective disorders. The effect of association, might have been avoided by using the term *affective*, but the thing itself would remain, and there, probably, the objection really lies."

To other portions of this treatise I might refer with profit, but the limits of my essay will not permit of extended analysis. The chapter on Lucid Intervals is a careful, presentation of a difficult and much-disputed subject. In a few pages, he condenses the important facts and infer-

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ences with reference to the subject. In this chapter, as in so many other places, he throws the weight of his opinion in support of the views of those who have drawn their inspiration from direct and long-continued contact with the insane. While he does not deny absolutely the possibility of lucid intervals, he shows how careful we should be to distinguish between temporary cures, simple remissions, intermissions or abatements, and genuine lucid intervals.

Dr. Ray has been spoken of as a doctrinaire and an extremist, but no one who has carefully read his psychiatrical writings can justly entertain such an opinion. Such charges have been commonly made by those who disbelieve in the stand which he has taken with reference to such subjects as partial moral mania, irresistible morbid impulses, the irresponsibility of certain classes of epileptics, etc. While, doubtless, a strict analysis of his cases will lead to the exclusion of many of them from the list to which he assigns them, many remain to uphold and confirm his views.

It is the fashion also of some physicians and lawyers to speak of men like Dr. Ray as theorists and closet philosophers; but he was in the highest sense a man of large practical experience and observation. As the sketch of his life shows, he spent many of his best years of his life in the active work of superintending an insane hospital, a work in which he acquitted himself to the satisfaction of all. From one of those who knew him well, I have received some particulars as to his qualities and qualifications as a superintendent, and they were unquestionably of the highest order.

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In 1863, Dr. Ray published a small work on *Mental Hygiene*, whose purpose was well stated by its author, namely, "mainly to expose the mischievous effects of many practices and customs prevalent in modern society, and to present some practical suggestions relative to the attainment of mental soundness and vigor."

It is surprising that this work on Mental Hygiene has not recently been reprinted. I do not know of any book on the same topic approaching it in merit. In the five chapters composing the volume, it treats of mental hygiene as affected by cerebral conditions, by physical influences, by mental conditions and influences, by the practices of the times, and by tendency to disease. Each chapter is a finished and polished essay. His facts are well grouped and presented in orderly succession. His views are conservative and yet positive. On every page he shows his wide acquaintanceship with literature, his analytical and philosophical cast of mind, and his practical knowledge by experience of the subjects which he discusses. His language is pure and felicitous, the treatise abounding in beautiful sentences as well as in solid sentiments.

In 1873, he published a work entitled *Contributions to Mental Pathology*. With one or two exceptions, the papers contained in this volume had previously been published in Journals and Hospital Reports. The essays were evidently selected by the author as representing his best work, outside of the text books published by him. All the papers in this volume are of the highest interest and value. That Dr. Ray was far ahead of his and the

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present time, is shown in the manner in which he deals in them with some of the profoundest problems of psychiatry, as when he discusses moral insanity, the trial of Rogers, of Baker, and of Winnemore, and when he treats of the insanity of seduced or deserted women, and of certain famous will cases.

The following is a list of the articles contained in this volume:

Address on the Occasion of Laying the Corner-Stone of the State Hospital for the Insane, at Danville, Penn., August 26th, 1869.

Causes of Insanity. Reports of Butler Hospital, 1863, 1864.

Statistics of Insanity. American Journal of Insanity, July, 1849.

Objections to Moral Insanity considered. American Journal of Insanity, October, 1861.

Doubtful Recoveries. American Journal of Insanity, July, 1836.

Delusions and Hallucinations. American Journal of Medical Sciences. July, 1868.

Confinement of the Insane. American Law Review, January, 1869.

The Law of Insanity in Criminal Cases.

The Trial of Rogers. Law Reporter, February 1845.

The Trial of Baker. American Journal of Insanity, July, 1846.

The Trial of C. A. American Journal of Insanity, January, 1856.

The Trial of Cangly. American Journal of Insanity, July, 1865.

The Trial of Winnemore. American Journal of Insanity, October, 1867.

Insanity of Seduced or Deserted Women. American Journal of Insanity, October, 1866.

The Hinchman Case. Law Reporter, August, 1849.

The Parish Will Case. Medical Opinions in the Parish Will Case.

The Angell Will Case. American Journal of Insanity, October, 1863.

Management of Hospitals for the Insane. Report of the Butler Hospital, 1863.

Medical Experts. Read to the American Social Association, at Philadelphia, Oct. 1870.

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Insanity of King George the Third. American Journal of Insanity, July 1855.

Shakespeare's Illustrations of Insanity. American Journal of Insanity, April, 1847.

Illustrations of Insanity by Distinguished English Writers. American Journal of Insanity, October, 1847.

In his Contributions to Mental Pathology, we have by no means represented all the Miscellaneous work done by Dr. Ray. The *American Journal of Insanity*, from the time of its establishment to the period of his death contains frequent contributions from his pen. The *American Journal of Medical Sciences*, the *Journal of Mental Science*, and other medical periodicals were also honored by his contributions. In his later years, during his residence in Philadelphia, he frequently furnished reviews of medical works in his own line, particularly to the *American Journal of Medical Sciences*.

The following are such of these miscellaneous contributions as I have been able to find :

Observations on the Principal Hospitals for the Insane in Great Britain, France and Germany. American Journal of Insanity, April, 1846, Vol. 2, p. 289.

Legislation for the Insane in Maine. American Journal of Insanity, January, 1848, Vol. 4, p. 211.

Butler Hospital for the Insane, Providence, R. I. American Journal of Insanity, July, 1848, Vol. 5, p. 1.

A Contract sought to be avoided on the Ground of Insanity. American Journal of Insanity, October, 1848, Vol. 5, p. 78.

Project of a Law Regulating the Legal Relations of the Insane. American Journal of Insanity, July, 1850 and January 1851. Vol. 7, ps. 92 and 215.

Hints to the Medical Witness in Questions of Insanity. American Journal of Insanity, July, 1851. Vol. 8, p. 58.

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The Popular Feeling Towards Hospitals for the Insane. American Journal of Insanity, July, 1851. Vol. 9, p. 36.

Trial of Furbush. American Journal of Insanity, October, 1852. Vol. 9, p. 151.

Undescribed Forms of Acute Maniacal Disease. American Journal of Insanity, October, 1853. Volume 10, p. 95.

Etherization in the Treatment of Insanity. American Journal of Insanity, October, 1854. Vol. 11, p. 164.

Insanity and Homicide. American Journal of Insanity, January, 1856. Vol. 12, p. 205.

The Labor Question, and Hospitals for the Incurable. American Journal of Insanity, April, 1866. Vol. 22, p. 438.

Epilepsy and Homicide. American Journal of Insanity, October, 1867. Vol. 24, p. 187.

Homicide—Suspected Simulation of Insanity. American Journal of Insanity, October, 1874. Vol. 34, p. 241.

The Duncan Will Case. American Journal of Insanity, January, 1875. Vol. 31, p, 275.

Dr. Ray's description of the Butler Hospital for the Insane shows his practical ability; demonstrates that he was able not only to discuss the higher problem of jurisprudence and pathology, but also in the most painstaking way to investigate and record the results of observations with reference to strictly practical matters. This same ability is shown in a few other of his papers, notably in the admirable article on the *Labor Question and Hospital for Incurables* in the *American Journal of Insanity* for April, 1866, extracted from his report for 1865 to the Corporation of the Butler Hospital for the Insane; in his address on the occasion of laying the corner stone of the State Hospital for the Insane at Danville, Pennsylvania; and in his reports on the Management of Hospitals for the Insane from the report of the Butler Hospital, 1863.

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Dr. Ray's extensive reading is shown almost in all his papers. History, biography, poetry, philosophy, romance, as well as general medical and psychological literature, and psychiatry in its most special aspects, were at his command. One of his nearest friends has told me of the great delight that it afforded him and others to gather around him when he was in his best mood and listen to the stream of information and eloquence easily poured forth on topics of the most diverse character.

His literary style is of a high order of excellence. A uniformity of merit runs through his writings as they extend over a series of years. Close as is the attention which he pays to subject matter, he seems scarcely ever to lose sight of the importance of diction and arrangement. His early as well as his late productions indicate that he paid great attention to minor excellencies of style —to precision of statement; to carefulness of plan; to the avoidance of verbal redundance and tautology, etc. His metaphors are not mixed nor turgid, his quotations are always apt, and do not have the appearance of being forced or far fetched. Not only in his more definitely literary productions, as in his "Delineations of Shakespeare," but in the strictly technical subjects which he discusses, we see the meritorious characteristics of his style. One of the most delightful of his productions was a little brochure entitled, "Ideal Characters of the Officers of a Hospital for the Insane."

"Dr. Ray," says one of his biographers, "was not a stranger to the treasures of general literature. His very ingenious brochure on the 'Ideal Characters of Hospital

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Officers,' suggested by a tractate of the quaint old Thomas Fuller, and read at the meeting of the Association of Superintendents, at Baltimore, in 1873, will be well remembered by many of our readers, as a remarkable jeu d'esprit out of the usual line; and it is not too much to say—as was implied in some impromptu verses made by one of the members on this occasion—that the charming description of the good Superintendent was an unconscious delineation of his own character and career. As the poet says of Socrates, 'And what he taught, he was.'"

The following is a portion of this description:

"The Good Superintendent observeth and studieth not for himself alone. He recognizeth the right of his professional brethren to participate in the fruits of those opportunities which his position affords. Them he looketh upon as a sacred trust of which he is bound to render a strict account. He, therefore, so ordereth his labors as to reserve some time, even if it be but the smallest fraction of the day, for study and reflection. The more he studies and learns, the more deeply is he impressed with the littleness of his knowledge, and the less he is disposed to indulge in any pride of opinion. While his studies and thoughts are, of necessity, directed chiefly as a special department of the healing art, he is not an indifferent observer of what is passing in the larger field of medical science, and therefore he cultivateth friendly relations with his professional brethren, displayeth an interest in their labors, and endeavoreth to inspire them with an interest in his own.

A few more quotations from his writings will serve to illustrate the charm and beauty of his style:

"*The mind*, as I understand it, embraces all the powers, qualities and attributes, which are concerned in maintaining those relations to other beings that are necessary to our highest welfare. The faculty which investigates the relation of cause and effect is not more truly a manifestation of mind, than the power to love and hate. Whether we meditate on lofty truths, or on the beautiful creations of the painter and sculptor; whether we recognize and revere the claims of superior virtue, or burn with desire to revenge a wrong, whether we yield to the allurements of love, or start with horror from impending destruction—in each and every instance, we manifest some quality of mind. Like the flower, like the insect, like the crystal, like every work of God, the mind is complete and perfect in its kind Every one of its

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powers is designed to accomplish some indispensable purpose, and bears the marks of unerring wisdom. Unlike the works just mentioned, however, it is susceptible of infinite development, whereby it becomes capable of fulfilling the nobler ends of our existence." (*Mental Hygiene*).

"Even where this exclusive cultivation of the ideal power is manifested in a devotion to poetry or the fine arts, the actual performance will always evince imperfections that spring from the neglect of the other faculties. The great poet or painter is far from being a man of one idea. He achieves his position, not more by the flights of his fancy, than by the wisdom that informs and animates his ideas. The Plays of Shakespeare abound with the practical sagacity of Bacon's Essays; the grandeur of Milton is derived, in no small degree, from his rich and varied learning; Leonardo, Michael Angelo, Raphael, sounded the depths of philosophy, and their immortal works bear many a trace of their large and liberal culture." (*Mental Hygiene*).

The following is a fine piece of descriptive writing:
(American Journal of Insanity, Vol. 2. p. 309, 1846.
Observations on the Principal Hospitals for the Insane.)

"No one who visits the English Asylums, can help being struck with the beauty of most of their sites, and the good taste that presides over their outside arrangements. Many of them are placed on eminences which command an extensive view of the adjacent country, the field of vision embracing hill and valley, wood and water, in their most agreeable combination, while fields of grass and tillage divided by hedges and trees, grazing herds, cottages and country seats, form the nearer features of a landscape reposing in the softened light of an English Sun. The Leicester Asylum is peculiarly fortunate in its site, which used to be a source of unfailing interest to its inmates, some of them at least who could never tire of the rich variety of the scene around them. The country, too, seen from the asylum at Perth, though marked by the bolder features that characterise Scotch scenery, is perhaps, unrivalled for its beauty, while its interest has been heightened by the witchery of the poet's spell. The Tay and its lovely valley, Scone, high Dunsinane, and the Grampian Hills, invest it with a moral charm, a view of whose lengthened outline stretching far away in the distance, reminds one of those masterly pieces of perspective in Ruysdael's pictures, where the eye ranges along an interminable line of objects which gradually fade away with such a natural indistinctness, that it strains itself unconsciously to penetrate through the deepening obscurity. The site of Jacob's Asylum at Siegburg does infinite credit to the good taste of the monks who selected it for their abode. Perched upon a rock that rises abruptly from the plain, it overlooks a scene of remarkable richness and variety. Below at the base of the rock lies a little village, while further on the country opens into a wide expanse of richly cultivated fields, through which the

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Sieg rolls its placid waters. Beyond these to the West the observer may discern the spires of Bonn, and the height of Krewzburg rising behind it, and catch an occasional glimpse of the Rhine, until it is completely shut out of view by the lofty range of the Seven Mountains and the Drachenfels."

Great literary and critical ability, as well as philosophical insight, are shown in such papers as the *Insanity of George the Third*, *Shakespeare's Delineations of Insanity*, and *Illustrations of Insanity by Distinguished English Writers*, three of the essays found in his contribution to Mental Pathology. In the Shakesperean essay he discusses in a delightful manner the various characters introduced by Shakespeare as illustrating forms of insanity. He shows the pre-eminence of Shakespeare by interesting comparisons with other English dramatists, as Otway, and Beaumont and Fletcher; although, I must say, that after all, I doubt whether even Shakespeare has given us as perfect delineations of insanity of different types as Dr. Ray, in his enthusiasm, would lead us to suppose. Dr. Ray takes the view that Hamlet was insane, that the case was not one of simulated insanity as was generally supposed down, at least, to times comparatively quite recent. He does not discuss that view of the character of Hamlet which seems to us would best bear the light of analysis, namely, that he was a man really insane, but at the same time simulating insanity of another form —a case of genuine melancholia who puts an antic disposition on.

In his introduction to his essay on the "Insanity of King George the Third," he discusses the possible great evils which might arise from the insanity of the head of the Government, or of any official in high public position.

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Speaking of the experience in the past in this respect, he truly remarks that it furnishes no security for the future. In the case of Peter of Russia, the insanity of the Sovereign gave rise to a political crisis and blocked the wheels of government; and, he says, it is easy to conceive that in a republican form of government like ours, the difficulties accompanying it would be far less manageable than in one where those immediately around the patient are bound to him by ties of loyalty and long association. When, exactly, to interfere, how the interference should be made, when it should cease—these are questions which we cannot doubt, would fearfully try the conservative powers of our system. Recently, in Philadelphia, the insanity of the Sheriff of that city has furnished an example, in a smaller sphere, of the difficulty thus conceived by Ray with reference to the Sovereign or chief of government.

Of Dr. Ray's personal appearance and characteristics, Dr. Kirkbride speaks as follows:

"Dr. Ray was about the medium height, and he did not possess a very robust constitution. His grave and marked features, his abundant hair for many years entirely white, and always somewhat in disorder from his manner of treating it, made him, although of moderate stature, a striking picture whenever he appeared in court or in any deliberative body. And the effect of his presence was increased when he spoke, by the clearness and distinctness of his language, by his dignified manner, and by the conviction which his impressive mode of treating a case, rarely failed to bring to his hearers, that they were listening to one who was thoroughly familiar with his subject, and whose testimony was based on a careful study of the case, and an earnest desire to arrive at just conclusions in reference to it."

"Although to a stranger, Dr. Ray's manners might at first seem somewhat austere, this opinion would be corrected by a short acquaintance. With his intimate friends and associates he had the most genial qualities. His conversational powers were quite remarkable, for he talked well on every subject, and what he said was interesting alike to the gravest judge,

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to the most profound specialist, and to the little children with whom he was always a favorite. His ability of adapting himself to the society he was with, was indeed one of the striking features of his powers of conversation, which have not often been surpassed. Those who knew him best, loved him most and appreciated most highly his varied traits of character, his gentleness and firmness, his unselfish interest in his fellow-men, and his readiness to give his valuable time for the benefit of those who were in affliction and sorrow."

Dr. Ray's discourse on the *Life and Character of Dr. Luther V. Bell*, read to the Association of Superintendents of North American Institutions for the Insane, at its annual meeting at Providence, R. I., June 10th, 1863, is an admirable example of an able biographical discourse. While, in many respects, an eulogy, it shows also a critical spirit. Much that he says of Dr. Bell could with fitness be applied to himself, particularly the following paragraph: "The moral endowments of Dr. Bell were no less concerned than his intellectual, in making him a useful man and an honor to his race. A love of the right, the true and the good, irrespective of all conventional distinctions, was the vital principle of his moral life. A mean, sordid, or dishonorable act was as remote from his nature as the poles are asunder, and his conduct was habitually governed by motives of the most elevated character. If his extensive knowledge of men prevented any childlike faith in human rectitude, it did not limit his indulgence to their faults, nor lead to a cynical distrust of all apparent virtue. His professional duties brought him in contact with all sorts and conditions of men, thus making him familiar with the darker aspects of our nature, but such experience did not harden his heart. It rather led him to look on vice and crime as a

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subject of curious and most important study with reference to their proper treatment by governments and individuals, which, he was disposed to think, should embrace but little of the vindictive element. To this view he was led, not more by his views respecting the relations of vice to organic imperfection, than by the all-pervading kindness of his nature."

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SOME ASPECTS OF THE DRUSE CASE.

By E. W. Chamberlain, Esq.

Of the New York Bar.

Sturdy old D. M. Bennett, who was imprisoned for his religious opinions, used to say, with sententious vigor born of his severe experience, that "Justice is a very dear article, and then one is very likely to be imposed upon in the quality." As the gap widens between progressive thought, impelled by scientific discovery, and technical justice retarded by ancient precedent, the inadequacy of our present judicial methods becomes more and more glaringly manifest, and it is more and more apparent that the quality of our justice is better suited to a past age than to our own times. It has, however, long been a standing argument, and, perhaps, not the least cogent one, against capital punishment that judicial proceedings are too fallacious to warrant determinations upon which human life may depend, and this argument never was fortified by stronger exemplification than is afforded by the case of Mrs. Druse, whose conviction of the murder of her husband has just been affirmed, in a perfunctory way, by our Court of Appeals, and for the

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commutation of whose sentence to life imprisonment many humane people are beseeching our Governor. The many cases in which innocence has been demonstrated after it is too late for the demonstration to avail the victim, are no more conclusive arguments against capital punishment than is this remarkable case of Mrs. Druse, for though there can be no doubt that Mrs. Druse actually murdered her husband, there may be many legitimate doubts whether she was morally or legally responsible for the act, and these have been strengthened rather than removed by the *trial* and all its attendant circumstances.

The record in the case contains fourteen solid consecutive pages narrative of neglect, cruelty and foul and abusive outrage endured by this wretched woman from her husband for twenty years. This culminated in a blow, immediately preceding his murder and provocative of it, which he dealt his wife with such violence that her eye was closed for over a week. Three witnesses testify to the effect of this: 1. Mary: "After father struck her she acted as though she was crazy. She acted like a wild person. Her eyes looked wild. She talked very fast. She acted different than I ever saw her before." 2. Gates: "She was excited. She appeared just like a crazy person." 3. George: "She looked wild. She was frightened." Apart from this evidence the atrocious details of the crime are enough to suggest to any thoughtful person serious doubts of the mental integrity of the murderess. The shooting in the presence of witnesses, in the family circle, all the children assisting, indicates a very peculiar psychic condition. No sane woman would

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do such a thing without great provocation, and the provocation shown, taken in connection with twenty years of outrage, and the fact that Mrs. Druse had reached a critical period of life (about forty-five years of age) was certainly sufficient to produce insanity.

Maudsley, in "Pathology of Mind, p. 210, says: "When menstruation ceases entirely at the change of life a revolution takes place in the system which favors the production of insanity in those predisposed to it and is sometimes enough to produce it. There is a variety of melancholic derangement occurring at this period which has been described as climacteric insanity. Most women suffer some change of moral character in consequence of the revolution which the whole economy of the constitution undergoes at the change of life." In "Responsibility in Mental Diseases," p. 155, he says: "Now if it were possible in all cases of homicidal insanity to point to evidence of derangement before the outbreak there would be infinitely less disinclination to admit the existence of disease. In most of the genuine cases I doubt not this can and should be done. But if we go on to declare that there cannot be a true case of homicidal insanity, save where antecedent symptoms of disease have been observed, we are certainly going further than we are warranted by either experience or *a priori* considerations. For in the first place authors of weight and authority maintain positively the existence of such cases * * * * Secondly, other diseases sometimes declare themselves in quite a sudden manner * * * * Again, on page 156, he says: "Let it be borne well in mind then

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that there are latent tendencies to insanity which may not discover the least overt evidence of their existence except *under the strain of a great calamity* or of some bodily disorder, *and that the outbreak of actual disease may then be the first positive symptom of unsoundness*, the brain in respect of its mental functions differing not in this regard from itself in respect of its other functions nor from other organs of the body in respect of their functions." I think I am not stating it too strongly when I say that the best testimony of the medical profession is to the effect that an excitable woman, however enduring, after many years of cruel treatment from such a source as a husband is predisposed to morbific, if not acute, insanity. Dr. J. H. Oxner, of Rome, N. Y., who has taken much interest in this special case, writes in a private letter concerning the effect of the change of life upon women, "while thousands go over safely, amid comparatively happy surroundings, now and again one dies; oftener they become broken in health, while some under constant domestic bickerings become insane and never recover; others under like unhappy circumstances become desperately insane, and their mania spends its force in some desperate deed, to their eternal regret. I can silence women who revile Mrs. Druse, but I cannot convince them. A worthy neighbor told me during treatment for the same 'change of life' that sometimes when things went wrong with her she felt as if she could tear God from his throne. But this is so long ago she has forgotten it." The manner of the disposal of the body was pre-eminently the act of an insane woman. With

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the testimony of the children superadded, all the evidence points directly to an unsound mental condition of the defendant, and it is a reproach to the administration of justice that this woman has exhausted all her legal remedies, and been finally sentenced to be hanged, and that up to this time no intelligent investigation has been made, nor even attempted, into the question of her mental and moral responsibility. This woman was poor, and lacking means to adequately prepare a defense, which requires great elaboration and expense, and which is at all times unpopular and difficult of explanation to the average juryman. Her counsel, in the exercise of their best discretion, thought it prudent to forego a defense which, when incompletely presented, surely works disaster, and resolved to rest upon other grounds. They cannot fairly be censured for this. Their position was a difficult one. Overwhelmed by a morbid prejudice which pervaded the whole community and clamored for a victim, their skill was of little avail, without the fairness which we have a right to expect in a court. It was the duty of the judge, whose attention had been called to these facts, to save this woman from death, or at least to make some effort to ascertain her true condition. The old law books tell us that it is the duty of the judge to protect the rights of the prisoner to the uttermost, but we have drifted far away from this principle, and it seems to be now considered quite a feather in the cap of a judge if he can by any means, fair or foul, procure a conviction. There are other features in which this case was grossly unfair, yet this judge is reported as saying

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that he is "aware of no reason why an application for commutation of sentence should be granted." If a trial is a search after the truth of a matter, the most important part of this trial has been omitted, namely, the inquiry into the sanity of Mrs. Druse, and until it is proven beyond all question that she was morally responsible for her acts, it will not be well for the State to proceed to extremes in her case. The safeguards of life and liberty are already too few, and the people will resent the unwarrantable and wanton taking of life upon such superficial judicial proceedings. The Governor has been badly advised in this matter, and reconsideration is in order.

The Governor and the jury appear to have been influenced by the proof that the woman was quarrelsome, resentful and provoking, but the fact is ineradicable that she was of a kind, gentle disposition before marriage, whereas her husband was vindictive and cruel before marriage. There is abundant proof that she was driven by daily mistreatment into a condition in which her desire to slay her persecutor was uncontrollable. She belonged to a rural population, in which labor was as hard for the human as for the other animals. As between the wife and children in the house and the horses and cattle in the barn the latter had probably the easier time of it. Work was all of life for her, and at length the unnatural life had its bloody result, and she was changed by hard labor and ill treatment from a well-intentioned woman to a murderess. She did not kill her husband for the sake of another man, for self aggrandisement, nor for

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money. There was no concealment in the act. Before her children, who had witnessed his brutality to her, in a frenzy, she did what any poor, hunted, desperate, suffering creature would be most strongly tempted to do—she ended the chapter of her ever present misery by rendering the cause of all her wretchedness powerless to do her further harm. If a man should cruelly beat another's wife and menace her life do you think there could be found a jury of men who would send the first to the gallows when, as her protector, he took the life of her assailant, even if opportunity was afforded after the first hot flush of indignation had cooled and in the eye of the law the act was deliberate? I do not think such a jury could be found. If a husband who resents outrage to his wife by taking life is guiltless of murder in the first degree, then, according to the verdict in the Druse case, because a brutal man was her own husband he had the right to beat and abuse her. Having no other husband to defend her, or resent an outrage, she must die for doing herself what many women could have done for them by their protectors. In other words, the law justifies a man for cruelty to his own wife but not for cruelty to another man's wife.

Let us now give attention to Governor Hill's opinion refusing to commute sentence. He opens with a common place too frequent in such documents. "It is conceded that she has had a fair trial before an impartial jury of the County of Herkimer. Who concedes this? Mrs. Druse does not. But if she did, can we be sure that it is not to obtain some privilege or necessity which she

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may consider to depend upon her making such an admission? Is she a fit judge of what is or is not a fair trial, and is she a proper person to make such an admission? Do her counsel concede it? I think not. There are many situations in which politic and judicious counsel may be so anxious to avoid exciting opposition as to apparently yield much, but in this case such a concession would be yielding too much, and I doubt if counsel wish to be unqualifiedly understood as binding themselves by such an admission. Do the applicants for her commutation concede it? Emphatically no. The Governor's assertion that the trial was fair is gratuitous and misplaced. It is a weakness in a judge to try to cover up his own shortcomings by saying to a condemned, who is not in a position to answer back, that his trial has been fair, and it is weakness in the Governor to make use of such language here. But the trial of Mrs. Druse was certainly very unfair in several particulars. It was especially unfair in this, that no man or body of men could fairly judge of this offense committed by a miserable abused wife and mother, nor conceive the fearful struggles of the creature with what sense of right she possessed, during long years of overwork and abuse; during periods of physical weakness peculiar to women, when she needed care and kindness. There was no one on the bench, at the bar nor among the jury who could regard nor even understand the plea her sufferings made for her. She was not tried by a jury of her peers. Again, the ordinary juror is subject to all sorts of influences *dehors* the merits of the case. There can be no doubt that the public discussion of the

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revolting details which followed the murder exerted a considerable influence upon the jury. A fairer trial might undoubtedly have been had anywhere else than in Herkimer County. It is a sound and wise rule of law that in criminal cases the jury are paramount judges of the law as well as of the fact. The insane anxiety of judges to gain convictions has led to the overlooking of this rule. Practically, it is obsolete, and juries knowing nothing of it, go on mechanically and stupidly grinding out convictions. It should be the business of the judge in every criminal case to lay down this rule, and to explain to the jury the rationale of it. Failing this, the trial of Mrs. Druse was unfair.

The Governor then says, "The defendant was not sworn in her own behalf at the trial nor in any preliminary examination." Does this operate to her prejudice? She was under the control of her counsel, and they had a delicate task to perform. Shall we blame them because they declined to submit an ignorant client to the keen handling of a shrewd attorney, prepared by study and long practice, to turn everything to his advantage, and fortified with the power and wealth of the county? Did they mistake in deciding as they did? No. But if they did make a terrible mistake in the exercise of their judgment, would not that be a reason for the Governor's mercy. The statute expressly provides that "the refusal or neglect to testify does not create any presumption against a defendant" (Code of Criminal Procedure, Section 393). Was the Governor's mind free from such presumption? If yes, why does he mention this circum-

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stance at all? The recital in the Governor's opinion of recent cases of murder, is an admission that hanging does not prevent murders, and the brief respite he grants seems, under the circumstances, little more humane than the antics of a cat with a captured mouse.

This whole business of crime and punishment needs remodelling. The punishment of one murder by another is unworthy of our times. It is revolting, and the enlightened spirit of the age cries, "Away with it." When Mr. Bennett was convicted, Charles Bradlaugh wrote from his home in England, "I hope this conviction may be *the last of its kind in America.*" The same wish comes fervently from my heart when I think of the conviction and sentence of Mrs. Druse. I hope it may be the last of its kind in America. By the proceedings in the Druse case, all confidence in the integrity of judicial proceedings is swept away. There is something terrible in the recklessness of it, and there is a growing and oppressive sense of the threat it conveys to each citizen of our land. The interests of good government, the preservation of order and the sacredness of human life demand that this conviction and sentence be the last of their kind in America.

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A SIMPLER AND MORE INTELLIGENT CLASSIFICATION IN MENTAL DISEASES, IMPORTANT.

By Professor J. J. Elwell.

Corresponding Member of the Medico-Legal Society, Cleveland, Ohio.

To the President of the Medico-Legal Society:

Your courage is admirable in the vigorous attack you are making upon the wild nomenclature now in use; but I fear you will find it so strongly entrenched and deeply cherished that the works of Hercules were mild recreation compared to your undertaking. More than twenty-five years ago I assailed this hoary-headed iniquity, and have followed it up occasionally ever since with but little if any effect. Behind the entrenchments you will find confronting you, encamped, one hundred thousand medical men in this country and as many more in other English-speaking countries, not to name foreign nations like France and Germany, who have been taught to adopt, guard and propagate, not only the present classification under consideration, but the traditions, prejudices and scholasticism of the dark ages—especially Greek and Latin, where the English language should be used. The same class of evils still

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exists in Medicine that was found in Law until recently. In law-pleadings, writs, all codes, statutes and the like, the custom has changed, and they now are written in English.

It is not long ago, when the common people could not read the sheriff's notice as printed (nor the sheriff himself, for that matter), informing them that their farms were to be sold. All this is now changed in law, and the same radical reform is needed in Medicine. The nomenclature, prescriptions—in short, the language of Medicine should be written and spoken in such language as the people, for whom it is written and to whom it is spoken, can understand. It is strange with what a grip this pedantry was long retained in the Law, and how it is still guarded in some departments of Medicine—notably in the classification of insanity, and in prescriptions. After long special study the medical man can, of course, master the foreign element and symbolism of his profession; but the learned men of other professions cannot, without the same special preparation, much less the great mass of the people for whom medicine exists. Neither judge, attorney, witness (unless expert), nor juror, can understand the terms used in the present voluminous and confused classification of insanity, without special preparation or the use of a medical dictionary.

All definitions, classifications, or formulas, on any subject designed to be used by, or necessary to be understood by the people—especially a subject so difficult as that of insanity—should be written or spoken in the people's language, or they are worthless for their

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purposes. The English language is abundantly copious, cogent, clear and strong for all purposes, and is fast becoming the language of diplomacy and of the world. The Greek and Latin scholar says: "No, the English is not sufficient for scientific and professional purposes." I think in this he is mistaken. Any proposition or subject designed for the use of the people, should be expressed in their language, or it may as well be left unsaid, so far as they are concerned. Strip Medicine of its Latin and Greek phrases and terminology, as in the case of the Law—in its statutes, codes and forms. There is no more sense or reason why this pedantry (commonly called scholarship), should be retained in Medicine than that it should have remained in law. You and your Medico-Legal Society will do a great work if you can bring about a similar revolution in Medicine, by reducing its present objectionable nomenclature to simple English, as has been done in the language of Law. In this effort you will have the entire and hearty support of the legal profession. If the reform could once be inaugurated, it could never go back. No lawyer can introduce a Latin or Greek phrase or quotation in addressing a jury without endangering his client's case, and being laughed down. Such phrases are barely tolerated in addressing the court—and even then he runs the risk of a jocular demonstration from his brethren of the bar. Such is the strong tendency to clean English. He who would instruct or influence the people in large masses or to a limited extent socially, politically or professionally, must use their language and be direct and to the point.

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It may be thought that I have overdrawn the evil as it is still found and cherished by the medical profession. Let us see if Medicine has kept abreast with Law in letting go old traditions, signs and symbols—reducing them to grammatical English.

You have an insane friend, we will suppose, and go with him to your physician for a diagnosis of his case, and for a prescription. After conversing with you and the patient, he takes from the library one of the latest text-books on the subject under investigation. It is said to be a very learned work and to have reached the second or third edition. In fact, it is "the only systematic work on the subject of insanity since the immortal Rush!" (Preface). In this new and wonderful "work,"—the author of which is a professor, not only of insanity and many other things, but of applied egotism, in a medical college in New York,—your physician finds over thirty groups; sub-groups, classes, sub-classes; orders, sub-orders; divisions, sub-divisions; genera, sub-genera; varieties; sub-varieties, etc., etc., all of which when submitted to a last analysis, to enumerate would bankrupt the multiplication table. Of course your physician turns in despair from this crazy classification of insanity. Other books, some of which I would like to specify, are more rational, but there is the same drift toward endless and senseless nomenclature of Greek and Latin terms. Amid all this world of learned confusion, and in the presence of an insane patient, your physician writes a prescription in the jargon of the books. At the top and of large size, he first writes this strange character "℞."

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This is the symbol of the great god Jupiter, and is a prayer to the king of the gods that the medicine may have his favor. If the character means "Take," why not write "take" instead of a symbol? Having thus propitiated the god of gods, he then writes the Greek symbol, "ʒ." Then comes "Octavius" or "O," for pint; "aqua" for water, etc., etc. Which seems craziest the insane patient or the prescription, is a problem you study over as you retire. And yet this is the formula that every man, woman and child gets of a physician when medicine is wanted, if the doctor is a graduate of a medical school. Such papers should be in a museum with the shield of Edward the Black Prince.

The medical profession and the medical colleges are not altogether to blame for this state of things—this temerity with which they hold to Greek and Latin signs and symbols. The Bishops of England do not write their common name in a Christian English, but in Latin. The Bishop of Oxford instead of writing his name as other people do, and adding Bishop of Oxford, uses the Latin cognomen, "Samuel Oxon." And so with them all. Lord Alwyn Compton, Bishop of Ely, writes his name, "Alwyn Ely." Du Chaillu, the great traveler and literary lion, said (he dinnered too much), "A man by the name of Samuel Oxon has just now sent me an invitation to breakfast with him—a man I have never heard of." How was he to know that Oxon meant the Bishop of Oxford? How long will such pedantry and nonsense be tolerated? The late Yale College address to the incoming president, Timothy Dwight, was in Latin, which

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could only be understood by a few of the great assembly present. Such a performance would not have been tolerated outside of college walls—why there?

There are, however, cheering signs of a change in college addresses, and Harvard sets the example and breaks through the habits and traditions of two hundred and fifty years. President Eliot delivered his address in good wholesome English. All understood it and all were pleased. Having this significant and successful example of ancient Harvard in breaking through old moth-eaten traditions and customs of centuries, there should be a firm movement along the whole line in favor of simple and plain language; then must follow simple classification, simple nomenclature and simple formulas and prescriptions.

There is no more reason for dividing insanity into thirty or forty groups, classes, orders, genera, etc., with Greek and Latin titles; than that murder, and burglary, or measles and head-ache should be thus grouped and defined by endless Greek and Latin prefixes and suffixes. There have yet never been two cases of murder alike in view of all the circumstances surrounding them and there never will be; nor of measles. The circumstances surrounding each case vary, and in a number of cases, the differences are infinite. Each case is *sui generis;* yet who ever thought of an endless nomenclature for murder or measles? There is no more sense or propriety in running out to a definition every new phase of insanity than doing so in any other disease.

If you can succeed in impressing this simple truth

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upon the medical profession; (and I have said, the legal profession takes this view of the case) and upon your international convention you will do a work that will ultimately over-throw the present vicious and middle-age system of classification of insanity, and establish on its ruins a simple English nomenclature that will be both intelligible and useful.

But little help can be expected, I fear, from international conventions, at least so far as the *continent* is concerned. Nevertheless, the English-speaking countries should unite and prosecute the reform you have undertaken, and there is no more fitter or more promising organization to lead the fight, than your Medico-Legal Society with yourself at the head. If it be possible to make an impression upon this long-standing evil, I have no doubt you will do it.

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THE PENAL ASPECTS OF SUICIDE.

By L. C. Whiton, Esq.,
Of The New York Bar.

Suicide is defined by the New York Penal Code as "the intentional taking of one's own life." It is my purpose in this paper to consider the Penal statutes relating to suicide, to attempting suicide, and to the aiding and abetting of a self-murderer.

It is with hesitation that I approach a subject that has been so fully and ably discussed already by two of the members of this society, Dr. O'Dea and Mr. R. S. Guernsey; and all that I can promise to do is to supplement their work by some of the more recent decisions on this subject; although to do this even, I am obliged to some extent to cover ground already covered by them.

Many of the ancient writers claim that from a moral and religious point of view suicide need not always be considered as an act of turpitude or as a crime. They have considered the step, as a writer in Blackwood's Magazine tersely puts it, as "an outburst of the universal appetite for calm." And, when we look at the

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agonies of grief and pain of many who live around us to-day, we cannot wonder that men who had not the stimulus of a christian trust should have exclaimed, as did Senaca, that while :

"It is cowardly to die to escape suffering, it is stupid to live in order to suffer." Senaca is often called the ablest champion of suicide among the ancients. He says in one of his epistles : "Does life give you pleasure? Live. Does it not? Go whence you came. No large wound is needed, a little prick will free you."

There have been many notable suicides among the ancients. Senaca himself committed suicide by opening his veins ; Saul was the first suicide mentioned in the Bible ; Demosthenes took poison ; Nicocles, King of Paphos, starved himself to death rather than submit to the dominion of Philip of Macedonia ; Mithradates took poison ; Lycurgus starved himself to death ; Cato, Anthony and Brutus stabbed themselves.

Its advocates have not been among the ancients alone. Buckle wrote that "Suicide is merely a product of the general condition of society ; in a given state of society a certain number of persons must put an end to their own life."

What he meant by this was that statistics show that the wonderful laws of average govern suicide ; that is, that the number of deaths by suicide per thousand remains practically the same from year to year. This though is not a premise from which an apologist of the act can reason.

Another writer, seeking to demonstrate by this fact

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an excuse for the crime says that "society prepares the crime, the guilty man is only an instrument in its execution."

Others have claimed that it is not characterized as a crime in the Bible. Although it is not specified by name in the Holy Book as a crime, still it is clearly covered by implication by the Sixth Commandment; so Shakespeare evidently thought when he wrote:

> "Or that the Everlasting had not fixed
> His canon 'gainst self-slaughter."

No man was ever more overwhelmed with disaster than poor Job, so that his wife advised him to "renounce God and die." But he said unto her, "Thou speakest as one of the foolish (or impious) women speaketh. What? Shall we receive good at the hand of God, and shall we not receive evil?"

Many attempted apologies of the act are quoted by Mr. R. S. Guernsey in his able monograph on suicide read before this society twelve years ago.

He quotes an Italian, Beccaria by name, who published an essay on Crime in Naples in 1764, who said? "Suicide is a crime which seems not to admit of punishment properly speaking, for it cannot be inflicted but on the innocent, or upon an insensible dead body."

"In the first case it is unjust and tyrannical, for political liberty supposes all punishments entirely personal; in the second, it has the same effect, by way of example, as the scourging of a statue. Mankind loves life too well; the objects that surround them; the seducing phantom of pleasure and hope,—that sweetest error of

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mortals, which make men swallow such large draughts of evil mingled with a few drops of good,—allure them too strongly, to apprehend that this crime will ever be common from its unavoidable immunity."

Hume has endeavored in an article on this subject to show that the act of suicide is justifiable and says "that it would be no crime in me to divert the Nile or Danube from its course, if I could; where, then, is the crime of turning a few ounces of blood out of its natural channel."

Rousseau in his *Nouvelle Heloise* says: "The more I reflect upon suicide, the more I find that the question reduces itself to this fundamental proposition; to seek one's own good and avoid one's own harm is, in that which hurts not another, the law of nature."

Both of these writers introduce into their arguments the false premise that suicide is not an injury to others, but only to the deceased.

It has been thought that "The Bridge of Sighs," written with the sole object of evoking charity for the despised, has yet, with a certain class tinged suicide with a halo of romance, and afforded a justification of cowardice and crime to the unreasoning and hysterical.

In certain instances suicide has been expressly recognized and authorized by law. The Grecian Areopagus and the Magistrates of the Island of Ceos had discretionary power to permit suicide; and the council of an Ionian Colony at Marseilles kept a preparation of hemlock to administer to those who showed them good reasons for taking their own lives.

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Justinian lays down the law that it is lawful to commit suicide, provided the State or public treasury is not affected thereby; but if an accused person committed suicide, his effects were confiscated. "But this confiscation was no punishment of suicide, as a crime in itself, being then only to take place when the crime committed incurred the confiscation of property, and when the person accused of it would have been found guilty."

(Anat of Suic., Winslow, p. 25.)

Under the Roman law suicide was legitimatized if resulting from disgust of life, sickness or bodily pain, grief from loss of relatives, disgrace from insolvency, desire for posthumous fame, fury or madness; but was illegal if committed *without appreciable cause*, or from remorse for crime or from an effort to escape sentence, in which last cases the act was followed by the confiscation of property. If a Roman soldier without cause made an unsuccessful *attempt* to commit suicide, he was punished with death.

Notwithstanding the views of many of the ancients were not in opposition to suicide; the majority viewed the act with abhorence.

Aristotle said that: "Courage is the mean between fear and rashness, while suicide is the union of both."

Zoroaster said that: "It is forbidden to quit a post without the permission of the Commander. Life is the post of man."

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Virgil thus describes the place of punishment of a suicide:

"The next in place and punishment are they
Who prodigally throw their souls away;
With late repentance they would now retrieve,
The bodies they forsook and wish to live.

And among modern poets, Dryden thus tragically describes the fate of the suicide in the lower world:

"The slayer of himself, too, saw I there,
The gore congealed, was clotted in his hair.
With eyes half closed and mouth wide ope, he lay,
And grim as when he breathed his sullen soul away."

Winslow, in his valuable work on the Anatomy of Suicide published in London, 1840, tells of a criminal at the Old Bailey who asked the Bench: "Am I to be hanged for stealing sheep?" "No," replied the judge, "you are not to be hanged for stealing sheep, but that sheep may not be stolen."

Not to punish the insensible cadaver of the self-murderer have various penalties been prescribed for this crime, but in order that thus the abhorrence of man at the act, and the criminality of the offense, may be demonstrated and thereby others deterred from its commission. This brings us to the consideration of the

FOREIGN PENAL LAWS (ANCIENT AND MODERN) RELATING TO SUICIDE.

In Thebes no funeral rights were granted the *felo de se* and his memory was branded with infamy.

In Athens, the hand of the self murderer was cut off and buried apart from the body, which was also immedi-

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ately buried without being burned, for to burn the body of a suicide would be a pollution of the holy element of fire.

Plutarch tells us that there was an epidemic of suicide by hanging among the Milesian virgins, which was finally put an end to by dragging through the streets the naked body of every young woman who hanged herself. (Winslow 179).

During the reign of Tarquin, an epidemic of suicide, by jumping off the Capitoline Hill, was prevalent. This was stopped, by the King exposing the bodies of the victims upon crosses for the birds of prey to feast on.

Guernsey informs us that a standard work on Jewish Law says that:

"If any one in anger shall be seen to throw himself from the roof of a house, or to commit suicide, there shall be no mourning observed nor *Keriah* (rending of the garments), nor any office performed in honor of the dead, as in other cases."

This brings us to the Middle Ages at which time the civil and ecclesiastical laws were so intermingled, that it is hard to distinguish between them.

It was an old English saying that:

> "When all the blandishments of life are gone,
> The coward sneaks to death, the brave live on."

An examination of the early English Canons which are collected and quoted in full in an appendix to Doctor O'Dea's Work, shows that suicide was first pronounced a mortal sin at the Council of Arles in the year 452.

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This was followed by a canon promulgated at the council of Braga in the year 563, which stated that suicides should have no burial service and no hymns were to be sung at their graves. They were to be buried in manner like to those who underwent capital punishment. This canon was again reaffirmed at the Council of Auxerre in 578, and at Troyes in 886.

In 967 under King Edgar, a law was promulgated classifying suicides with robbers, murderers and traitors and visiting the same punishment upon each. This law was affirmed at the Council of Nimes in 1184.

Among the laws of Henry III. of the year 1013 we find this enactment.

"Let him who hath murdered himself be fined in all his goods to his Lord, let him find a place of burial neither in the church nor the church yard, unless ill health and madness drove him to the perpetration. He who kills himself through weariness of life or being impatient of pain and grief, shall forfeit all his movable or personal estate though he is permitted to have an heir to his lands or real estate, * * * but the madman, or the idiot, or the infant, or the person under such acute pain as to produce temporary distraction, who kills himself shall forfeit neither lands nor chattels, because he is deprived of reason."

A similar law was enacted during the reign of Charles the Fifth.

From the diary of Robert Birrill, of Edinburgh, under the date of February 20th, 1598, we find the entry that upon that day "Thomas Dobie drownit himself

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beside the (Holyrood) Abbey and upon the morne he was harlit throw the towne backward and thereafter hangit on the gallows."

(Dr. O'Dea on Suicide, 134).

In the last century it became a common practice in England to inter a suicide at a cross-road and drive a stake through his body, presumably to prevent his ghost from haunting the inhabitants of the neighborhood. (4 Bl. Com. 490.)

The last case of cross-road burial is stated to have taken place in the year 1823, at the intersections of Grosvenor Place and Kings Road in the City of London.

(Dr. O'Dea on Suicide, p. 133).

By chapter fifty-two of the fourth volume of the statues of George IV, this law was altered so that suicides were permitted burial in the church yard or burial place of the parish, but they must be buried without religious rites, between the hours of nine and twelve P. M. and within twenty-four hours of the finding of the inquest.

The case of Hales vs. Pettit, decided in the fifth year of Queen Elizabeth, a report of which is found in Plowden's Reports page 253, contains an interesting discussion by the Counsel of the contending parties as to the time when the forfeiture of the goods and chattels, real and personal shall in the case of a *felo de se* take place, whether immediately before, or immediately after his death. On which point Sergeant Walsh said that "the act of suicide consists of three parts. The first is the imagination which is a reflection or meditation of the

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mind, whether or no it is convenient for him to destroy himself and what way it can be done. The second is the resolution, which is the determination of the mind to destroy himself, and to do it in this or that particular way. The third is the perfection which is the execution of what the mind has resolved to do; and this perfection consists of two parts, viz: The beginning and the end. The beginning is the doing of the act which causes the death, and the end is the death which is only a sequel to the act."

The quality of the offence, to whom the offence is committed, what he shall forfeit and at what time the forfeiture shall commence is also discussed.

Lord Dyer said as to the first point that "Murder is the killing of a man with malice prepense, and here the killing of himself was prepensed and resolved in his mind before the act was done, and also it agrees in another point with the ancient definition of murder, viz., that: '*Murdrum est occulta hominum occisio, nullo praesente, nullo sciente*;' so that always he who determines to kill himself determines by the instigation of the Devil to do it secretly, *nullo praesente, nullo sciente*, lest he should else be prevented from doing it. Wherefore the quality of the offense is murder."

"As to the second point, it is an offense against nature, again God, and against the King. Against Nature, because it is contrary to the rules of self-preservation, which is the principle of nature, for everything living does by instinct of nature defend itself from destruction, and then to destroy one's self is contrary to nature, and a thing

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most horrible. Against God, in that it is a breach of his commandment '*thou shalt not kill*,' and to kill himself is a greater offence than to kill another; against the King, in that hereby he has lost a subject, and he being the head has lost one of his mystical members. Also he has offended the King in giving such an example to his subjects, and it belongs to the King, who has the government of the people, to take care that no evil example be given them, and an evil example is an offense against him."

As to the third point, what shall he forfeit, it was agreed by all the justices that he shall forfeit all his goods, debts and chattels, real and personal.

As to the fourth point, they said that "the forfeiture shall have relation to the time of the original offense committed, which was the cause of the death * * * which was in his lifetime, and this act was felony." On this point the following quaint argument was employed by one of the counsel: "Sir James Hales is dead, and how came he to his death? It may be answered by drowning; and who drowned him? Sir James Hales. And when did he drown him? In his lifetime. So that Sir James Hales being alive caused Sir James Hales to die; and the act of the living man was the death of the dead man. And then for this offense it is reasonable to punish the living man who committed the offense, and not the dead man. But how can he be said to be punished alive, when the punishment comes after his death? Sir, this can be done no other way, but by divesting out of him, from the time of the act done in his

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life, which was the cause of his death, the title and property of those things which he had in his lifetime."

It has been conjectured by the eminent Shakespearean scholar, Sir John Hawkins, that this last argument suggested to Shakespeare the dialogue between the gravediggers in the first Scene of the Fifth act of Hamlet.

It has also been held in England that an attempt to commit suicide is a misdemeanor.

(Rex. vs. Doody, 6 Cox C. C. 463.)

and the person killing himself, supposing him in his right mind and at years of discretion, is said to be *felo de se* and the offence is committed as well by his unlawful malicious act, the consequence of which is his own death, as by deliberately ending his own existence.

(4 Cool. Bl. 189 Note 9; 1 Hall P.C 412.)

So if a woman take poison to produce miscarriage, and death ensues she is guilty of self murder, and the one who furnished her with the poison is accessory before the fact.

(Rosc Cr. Ev. 7th Am. Ed. 772, Fretwells case ib. 777.)

By the statutes, 33 and 34 Vict. (1870) c. 23, forfeiture of goods is abolished.

In 1879 a statute was adopted that for an attempt to commit this crime, a British Officer was cashiered, a private soldier imprisoned.

In order to avoid a curse and to express utter abhorence of the act, it is said that in the thirteenth century in parts of France and Switzerland the body of a suicide was taken out of an opening in the wall of the house made for that purpose and not through

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the door. The body was then dragged to the place of public execution and hung by the feet, afterwards it was cast out to the dogs; and the personal effects of the self-murderer were confiscated by the civil authorities. In other parts of France, as Lille, the bodies of suicides were burned. In the Province of Toulouse, the sentence was formally pronounced upon the cadaver as a murderer, and his goods confiscated. (Suicide O'Dea, p 129.)

In the Code Napoleon no reference is made to suicide.

Doctor O'Dea tells of a suicide whose dead body was in the year 1749, dragged through the streets of Paris, the face scraping the ground, to the place of public execution, then suspended twenty-four hours, after which it was cast out upon the highway.

There is now no law against either the attempt or the consummation of the act in France, accordingly the following advertisement which appeared in 1880 in the columns of *La Petit Parisien*, was not thought more than extraordinary:

"Suicidal. A young man to whom life is a burden, has resolved to put an end to himself, but wishes to accomplish his death in the most advantageous manner possible. He places therefore the sacrifice of his life at the disposal of any person, who for a suitable sum, would wish to intrust him with an enterprise, the issue of which would be necessarily fatal. This offer is very serious. Write to the initials K. R. V. 48 Post Restante, Anvers."

In Austria, Denmark, Norway and Germany the laws simply provide that the bodies of suicides shall be buried

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without any marks of respect and not buried in consecrated ground.

Miss Bird in her work entitled "Unbeaten Tracks in Japan" says that in that country suicides are of common occurrence. When a young man and woman wish to marry, and the consent of the parents is refused, they often bind themselves together and drown themselves. This is such a frequent offense that the New Code imposes penal servitude for ten years on people arrested in the commission of it."

We come now to the

AMERICAN PENAL LAWS RELATIVE TO SUICIDE.

In 1660, the Colonial Legislature of Massachusetts passed a statute which set forth, that, judging that God called them to bear testimony against such wicked and unnatural practices, and in order that others might be deterred therefrom, they enacted that every self-murderer should be denied the privileges of being buried in the common burying place of Christians, but should be interred in some common highway, where the selectmen of the town which such person did inhabit, should appoint, and a cartload of stones laid upon the grave as a brand of infamy, and as a warning to others to beware of the like damnable practices.

(4 Mass. Col. Rec pt. 1, 432, Mass. Col. Law. year 1672, 137; Anc. Chart, 187.)

That statute, says the Justice in the case of the Commonwealth vs. Mink (123 Mass. 422) though fallen into

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disuse, continued in force for many years after the adoption of the constitution.

By a Colonial Statute in the same colony, the verdict of the jury in the case of an inquest on the body of a suicide, must terminate with the following words:

"There and then voluntarily and feloniously, as a felon of himself, did kill and murder himself against the peace of our Sovereign Lord the King, his crown and dignity."

(Prov. St. 1700–1701, 12 W. III ch §7 Anc. Chart. 350.)

This was reenacted in substance, after the Revolution, the final words being changed to "against the peace and dignity of the Commonwealth and the laws of the same."

The case of the Commonwealth vs. Mink (supra) decided that notwithstanding the repeal of these colonial statutes, suicide had not ceased to be unlawful and criminal; a *malum in se*, although since a felony had been by statute defined as a crime punishable by death or State's prison, and in no other way, suicide is not technically a felony.

It has been held in Massachusetts that an attempt to commit sucide is not indictable.

(Commonwealth vs. Dennis 105 Mass 162.)

In several States forfeiture of goods in the case of suicide is by statute expressly abolished. This is the case in New York, Kansas, Virginia, West Virginia and Tennessee. In Dakota the Penal Code (sec. 229), declares that "although suicide is deemed a grave public wrong,

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yet from the impossibility of reaching the successful perpetrator, no forfeiture is imposed."

A similar provision is found in the Criminal Code of the State of New York (Sec. 174.)

An attempt to commit suicide is a crime according to the Criminal Codes of New York and Dakota.

In New York it is punished by imprisonment not exceeding two years, or by a fine not exceeding one thousand dollars or both.

In a recent case, the General Term of the Supreme Court Third Department, decided that suicide, or the successful attempt to commit it, is not made a crime by the New York Penal Code. Attempting suicide is made a crime (Sec. 178), but the attempt to commit suicide, if successful is suicide, and no crime, but only "a grave public wrong," but if unsuccessful is a crime. It then folows that in an attempt to commit suicide, the success of the attempt does not consummate the crime, but avoids it.

The Presiding Justice Learned, in a dissenting opinion says that by the Penal Code, an attempt to commit suicide is a crime, and if a man die from an attempt to commit suicide, he dies directly in violation of a criminal law of a State. "The man who attempts to commit murder is none the less guilty if he himself be killed in the attempt and if he therefore cannot be punished, the same reasoning is true of the self murderer." The decision of this case by the Court of Appeals will be watched with interest. I cannot but believe that this Honorable Court

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will sustain Judge Learned, and overrule his two associates.

(New York Supreme Court, December, 1886, Darrow vs. Family Fund Society, 3 N. Y. St. Rep. 745.)

I come now to the final division of my subject.

The penal statutes relative to the rendering of aid or assistance to a suicide in the commission of the deed.

Guernsey says in his work that, among the German States, Brunswick, Thuringia, Baden and Saxony alone punish those who are accessories to suicide and the Penal Code of India has also a penalty (p. 32).

In England it has been decided that if two persons agree to kill themselves, and one survives, the survivor is guilty of murder.

(Rex. vs. Dryson Russ and Ry., 523.)
(Reg vs. Alison and Car, p. 418.)

In some of the United States, this is by statute made a crime.

In Arkansas assisting another to commit suicide is murder. (Code Sec. 1523.)

According to the California Code (Sec. 400.) Aiding advising or encouraging one so to do is a felony. According to the Dakota Code "In any manner advising, encouraging or abetting, assisting or aiding one to commit suicide, or wilfully furnishing another with a deadly weapon or poisonous drug with which he kills himself, renders one liable to imprisonment for not less than seven years." In Kansas it is held to be manslaughter in the first degree.

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In Massachusetts, it has been decided that if one counsel another to commit suicide, and the other by reason of the advice kill himself, the adviser is guilty of murder as principal.

(Commonwealth vs. Bowen, 15 Mass. 355.)

And in Ohio it has been said that one who furnished poison to a person for the purpose and with the intent that she should with it commit suicide, and she accordingly took and used it for that purpose, or if he did not furnish the poison, but was present at the taking thereof by the deceased, participating by persuasion, force, threats or otherwise, in the taking thereof, then in either of the cases supposed, he administered the poison to her, and was guilty of her death.

(Blackburn vs. State, 23 Ohio St. 146;)

Forfeiture of goods and all attempts to punish the body of the self murderer are universally abolished as serving no purpose and inflicting the punishment on the innocent survivors of the dead criminal.

"Though here a mountain murmur swells
Of many a dark bough'd pine,
Though as you read you hear the bells
Of the high pasturing kine,
Yet through the hum of torrent lone
And brooding mountain bee,
There sobs, I know not what ground tone,
Of human agony."

Oberman.

"Revenge triumphs over death, love slights it,
Honor aspireth to it, grief flieth to it."

Bacon.

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And in the midst of this human woe reason will often be dethroned, and the moral sense blunted and there will always be those

> "Who will fling their own loads off
> And leave their fellows toiling."
>
> *George Eliot.*

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PRISON LABOR AND PUBLIC UTILITY.

L. L. SEAMAN, M. D., L.L.B.

Late Chief of Staff of the Blackwell's Island Hospitals and Penitentiary.

The published reports and procedures of Prison Associations, State and National, have year by year reached a wider circulation and a deeper influence. The philanthropist and sociologist, who have labored in the elucidation of these perplexed questions, are no longer set down as dreamers and doctrinaires, but take unchallenged place among the recognized workers for the commonwealth.

It was a long and tedious step between the nebulousness of theory and speculation, and their crystallization into popular conviction and statutory enactments. During this period of suspense or incubation certain ancient truths which had long dropped out of political economy, were brought to light afresh ; chief among which are the essential solidarity of society, the incorporation of all men into a common body or fellowship, the rich and poor, the good and bad, the wise and foolish ;—that no man lives to himself or dies to himself ; that thrift and poverty and evil can neither be isolated nor localized, but live and move and have their being and vitally rooted

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affiliations with the whole body politic, or as we choose to name it, the commonwealth.

So we have ceased to contemplate poverty ignorance and crime as incidental shadows, or excrescenses which touch society only superficially or tangentwise. In our autopsies or probings we have laid bare enough of the inner under-currents of social disorders to demonstrate their vital relations with past, present and coming generations. We have identified that mystic touch of nature which makes the whole world kin. We are growing in practical wisdom, and in place of tinkering and pruning the outlying symptoms of a deadly malady, have learned that restorative and regenerative work must begin at the very heart and root of our social existence. We learn that evil and decay are inevitable developments, pointing to a disintegration that all the while warns while it threatens; that conservative and preservative energies lie within reach and to cope with the terrible undertow of heredity, the outrageous stings of fortune, and the baleful inbreeding of ignorance and vice. In short, there is no place for pessimism in our sociology. The constructive and disintegrating forces are at perpetual war, and there is no truce conceivable. There is only room for the conflict, and the Staff of good hospitalers in their labors of healing and restoration.

As a practical out-growth of this new sociology, new measures are being established for the administration of our prisons and penitentiaries. We are henceforth delivered from the huckstering and mistaken policy

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which in administering the penalties of broken law, has converted its prison population into colonies of chattels and slaves sold to the highest bidder under a pestilent contract system, which at once and at the same time outrages the prisoners, enriches mercenaries at the expense of legitimate industries, and makes the commonwealth chargeable with inexcusable maladministration of its gravest responsibilities. Under a better policy we may expect that our prisons and penitentiaries shall cease to be propagandists of every social evil, where the State practically undertakes the criminal education of the dangerous classes. There is less of vengence and savage instinct in current legislation ; for it is felt that every man carries with him, even in the convict cell, the latent possibility of useful citizenship. We are thinking less of the "pound of flesh," the smart and terror of penal exactions, and more of rescuing that latent possibility. We are asking to-day what can be done for the rehabilitation of our prisons population. The experiments at Elmira throw unexpected light on the question. It is there demonstrated that the criminal classes need be neither pauperized nor enslaved, in the interests of justice. What is accomplished at the Reformatory can be attempted at Blackwell's Island, at Sing Sing, at Auburn and at Clinton. While the high percentage of men permanently restored to useful citizenship cannot be looked for under conditions greatly changed, the tide of recommitments can be checked and the number of confirmed criminals appreciably diminished. These results are already being realized in England where an analysis

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of criminal statistics exhibits a diminution of the criminal classes in a steadily growing ratio.

From the reports of the National Prison Association of the United States, for 1884–1885, it appears that there are forty-eight State Prisons and Penitentiaries with thirty thousand four hundred and eight inmates, fifty-five County Jails, Penitentiaries and Houses of Correction with fourteen thousand one hundred and fifty-nine inmates; thirty-two Reformatories with nine thousand nine hundred and twenty-eight inmates:—In all one hundred and thirty-five Institutions with fifty-four thousand four hundred and ninety-five inmates.

The problem of the present is such an administration of this department as shall result in the least burden to the community, while it secures the best ultimate advantage of the criminal. It is impossible in developing this question to ignore the Tramp population. This has already become a danger that baffles the sociologist and legislator. It is a prevailing epidemic gathering virulence as it grows. It is a parasitic infection, depleting the vitality of social organization. Repudiating all industries, it is wholly given over to laziness, pillage and debauchery. It already supplies rich recruiting ground for the Nihilist and Anarchist. Once a tramp always a tramp, is becoming a proverb. Here is a widely dispersed army of "vagrant men" which it behooves the State literally to "comprehend" as well as apprehend. Not only justice, but the public safety demands sharp and decisive measures for the suppression of this nui-

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sance. Perhaps the tramp has fallen below the reach of industrial invigoration and but a very slender line of demarcation separates him from sheer brutishness. Yet something must be done with him, and what shall it be?

We gather as the concurrent judgment of our Prison Associations, that the wisest employment for the criminal classes lies in the public service, as least likely to debilitate legitimate industries, while it would prove most beneficial to the community;—and this judgment we accept without reservation. While casting about in quest of projects supremely affecting the public well-being, we find sanitary and hygienic measures standing at the forefront; measures in which the great Roman civilization far surpassed ours. Inadequate water supply and defective sewerage constitute the fatality of our city population. Suppose that the problem should one day prove soluble and that Lakes Erie and Ontario should become the inexhaustible reservoir supply, not for the metropolis only, but for the northern and southern chain of growing cities that stretch between the great lakes and tide water. In the nineteenth century there are few impossibilities to science; in the twentieth, there will be less. But to restrict our inquiries to projects already subjected to rigid scientific research, let us take a brief survey of the water supply question now widely discussed in our leading journals and which is in direct line with the purpose of this paper. Fortunately, reliable data are at hand in the elaborate report on "A Water Supply for New York and other Cities of the Hudson

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Valley, by J. T. Fanning, C. E." The project is none other than a resort to the Hudson River headwaters, with the reservoir facilities and lake supplies in the accessible Adirondack regions. Starting with an elevation of three hundred and fifty feet, it is proposed to deliver through more than two hundred miles of conduit a supply, which, feeding the intermediate towns along the Hudson, shall be distributed in New York and its neighboring Cities with a "head" of two-hundred feet, at an estimated outlay for the first five hundred million gallons daily capacity of fifty-five million dollars. It is sufficient to state the plan in outline, we do not propose to follow the forceful array of facts on which it rests. Many are sufficiently well-known, such as the miasmatic, malaria-breeding Croton water shed with increasing pollution from agriculture and manufacturies, and its capricious seasons of drought, endangering a supply demonstrably inadequate at the best. Greater stress might have been laid upon the fundamental insufficiency of the Croton supply, lying at such a slight elevation above the sea level, as to seriously imperil the safety of the great commercial and financial world located below Canal Street; while leaving the larger part of the city without a natural pressure supply above the first or second floor. This deficiency, it may be urged, reacts perniciously against the public health; and as the ratio of the daily delivery of gallons *per càpita* diminishes, the public fountains lie unused, and the great hotels, factories and breweries are driven to the costly expedient of

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artesian wells, through many hundred feet of solid rock. The inadequacy of the Croton water is yet more evident, even when developed to the utmost limit, when we contemplate a population of ten million within half a century, and a daily consumption of twelve hundred million gallons. If scientific forecast is worth anything, the projectors for the New York of 1930 *must* resort to the upper Hudson headlands or some other region offering an inexhaustible supply.

Such a measure, contemplating the thrift of the Hudson Cities, as well as the metropolis and its neighborhood, assumes the magnitude and importance of a State enterprise and may well look to the State for practical support. Legislation opening the way, the able bodied inmates of Sing Sing, Auburn and Clinton, in organized bands are at hand for the undertaking, reinforced by the incorrigible Tramp vagrants, who, it is taken for granted, are shortly to learn their duty to Cæsar, and and pay in their full tribute. Here is a public service, which leaves all artisan industries unfettered by illegitimate competition, while it reduces the municipal and State expenditure to its minimum. The growth of the metropolis is the growth of the State. The report of the State Treasurer shows that New York and her sister City paid over fifty-four per cent. of the total State tax for 1886. The metropolis therefore, has the right to demand assistance from the State, when a question of such vital importance is at issue. The labor of construction is "hard," and convict labor ought to be "hard." But it

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is no harder than the labor of building the Erie Canal, which is not the product of convict labor. Granting the postulate of our advanced sociologists, that the legitimate field for convict labor is the public service, the application of convict (and tramp) labor to the construction of such public work as the metropolitan water supply follows as a logical corollary. Besides, there is no scientific or sanitary ground for questioning the ultimate advantage, physical and moral, of such service to the laborers employed.

Whatever cogency there may be in this line of thought, touches quite as distinctly the administration of municipal convict labor. An analysis of the Annual Reports of the Board of Commissioners of Charities and Correction discloses the constant expenditure of vast sums from the City Treasury for the support of able bodied convicts whose labor is comparatively valueless to the public who are charged with their maintenance. Under the existing system of municipal administration the people can hope to profit little from the usufruct of prison labor. The most superficial reader of current events cannot fail to detect the almost grotesque miscarriage of plan and purpose. Not long ago it became necessary to lay a line of pipes along the entire frontage of the Island Penitentiary, for a sufficient water service. How was it accomplished? Who dug the trenches? While there were more than a thousand convicts behind the bars, eating idle bread at the people's cost, the Commissioners in charge bringing over from the city paid laborers, paid from the

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people's treasury, who accomplished the task under the very eyes of the prison population. Plenty of straws may be found any day, telling which way this wind of unthrift and corruption may happen to blow. A neat illustration of the devious ways in vogue is unearthed in the recent official investigations before Commissioner Sherman, during which it was shown that in certain improvements at Hart's Island, involving the building of a "Crib," the people were mulcted out of something like fourteen thousand dollars, the Commissioners actually supplying stones and labor already stipulated and paid for under the contract with the builders, this shrewdly schemed speculation without doubt finding its way to that omniverous, insatiable bourne whence no "divvy" returns. This is a sample of a class of contracts; "and thereby hangs a tale." And yet what can be looked for from the official conclusions of a "Board of Commissioners" who juggle in their perpetual three-handed game with insolent unconcern, whether the interests of the people, or the safety of the treasury, or the appointment of officials to positions of gravest trust are the stakes at hand. A "Board" which affronts the general conscience of the commonwealth by placing the unseemliest specimen-rogue of the "Bloody Sixth," not in the strongest cell in the tombs, but an official possession of the emoluments and responsibilities of its Wardenship. The "Island" has for generations been the favorite winter resort for the thriftless, idle and abandoned classes who are given over to drink and profligacy. The Police

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Stations have long become the lodging houses for the coming and going "Islanders." There are public works constantly demanded by the growing metropolis. Why should not the gangs of brawny stone-cutters and metal workers who deplete the public treasury with their sterile toil on the Island, take in hand the construction of the great system of docks and quays, which one day are to engirdle the entire water-front of the City? Is there nothing to engage the latent energies of these costly excrescences of our civilization in the projected opening of the Harlem River as the great commercial entrepot of the future? There are quarries of building stone all about us waiting for the drill and blast and tool man. Absolutely cut loose from the octopus of political maladministration, what hinders the gradual development of a water front under the regulated labor of convicts, which shall provide for the inflowing commerce of both hemispheres? A permanent prophylactic energy would go with such a project. The habitual drunkard who "sobers up" in the graceful seclusion of the Island, the wife-beater, the bruiser and bully, the petty thief with the accomplished burglar, the pool-seller and the gambler with his pilot fish, the confidence man, with the inevitable ball and chain, and the sturdy toil of the docks and quays, waiting as the inexorable alternative for persistent evil living and doing, oftener would "think twice" in the hour of temptation. The Island prisons would become dormitories for the coming and going squads of convict toilers in the municipal service;

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and it is clear that under a swift, certain judicial administration with the liberal substitution of months for "days," and a department of corrections, free from ring-rule, the old-time procession of "rounders" between the Police Courts and the Island would dwindle to insignificance. Meanwhile the deturgent properties of even compulsory labor would be developed in the public service, with an energy quite inconceivable under the contract system, which has so long paralyzed the administration of our prisons and penitentiaries.

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EDITORIAL.

DEFINITIONS OF INSANITY.—TESTS OF CRIMINAL RESPONSIBILITY OF THE INSANE.—We published in our last issue some answers, sent to the editor of this journal, in response to the following inquiry, sent by him to Alienists, Jurists, Publicists, and Scientists at Home and Abroad, as well as a considerable number of definitions of insanity, from dead as well as living authorities.—The inquiry was as follows :

MEDICO-LEGAL JOURNAL ASSOCIATION,
Office of the Editor,
No 57 Broadway,
NEW YORK, 1887.

DEAR SIR :

Please give me your idea of the best definition of insanity under our present knowledge of that subject.

Also what in your judgment should be the legal test of criminal responsibility for acts committed by persons suffering from any form of mental disease. I am making a study of these topics, and would feel greatly obliged for your views.

Very faithfully yours,

CLARK BELL.

We continue the publication of the replies received as well as additional definitions we have collected, also upon the legal tests, of what should determine the measure of responsibility for the insane in criminal cases.

DR. ABERNETHY,—

Defines insanity as "The loss of the faculty of attention."

JOHN ABERCROMBIE, M. D.,—

"Insanity is a disease of the brain affecting the mind," he says "but this does not express the essential feature of insanity from a legal point of view, viz.: that it is a disease rendering a man irresponsible."

CHANCELLER, D'AGNESSAU,—

"Le fou," dit il, "est celui, qui dans la societé civile, ne peut s'elever à la mediocrité des devoirs generales."

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DR. BENJAMIN BALL.— (Paris)

Accepts Esquiril's definition of insanity, but defines an insane man thus:

"Un homme qui, par suite d'un trouble profond, des facultés intellectuelles, a perdu, plus ou moins completement, la liberté morale, et a cessé par consequence d'etre responsible de ses actions, devant la societé." (Leçons sur les maladies mentales 38.)

DR. BAILLARGER.— (France)

"C'est la perte du libre arbitre."

BUCKNILL & TUKE,—

"Insanity is a disease of the brain (idiopathic or sympathetic) affecting the integrity of the mind, whether marked by intellectual or emotional disorder; such affection not being the mere symptom or immediate result of fever or poison. (Psychological Medicine, p. 21.)

JUDGE BREWSTER.—(Philadelphia Common Pleas, 1866.)

"Has the defendant in a criminal case, the power to distinguish right from wrong, and the power to adhere to the right and avoid the wrong?"

G. F. M. D. BLANDFORD.—

"Insanity is a disorder of the highest organs of the nervous system which unite in the performance of that function, recognized and spoken of, as Mind."

BALFOUR BROWN,—

Criminal irresponsibility is best defined thus: "When a knowledge that certain acts are permitted by law, and that certain acts are contrary to law, and combined with this knowledge is the power to appreciate and be moved by the ordinary motives which influence the actions of mankind," the wrong doer should be held responsible.

DR. CHAS. L. DANA.—

"Insanity is a disease of the brain in which the physical faculties are seriously impaired."

JOHN C. SHAW.—

As to the definition of Insanity, I should not attempt one. All those who have made such an attempt have failed to satisfy themselves or others. LORD COKE, in Barnsley, Case 4 Co. 124.

Lord Coke defined in this case the "four manners of *non compos mentis*" as follows: 1. Idiot or fool 2 He who was of good and sound memory

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and by the visitation of *God*, had lost it. 3. Lunatics who have lucid intervals, and sometimes are of good and sound memory and sometimes *non compos mentis*. 4. By his own act, as a drunkard.

LORD HARDWICKE, in Barnsley *ex parte*, 3 Atk 168.

"Lunatic is a technical word, coined in more ignorant times, as imagining these persons were affected by the moon; but discovered by philosophy and ingenious men that it is entirely owing to a defect in the organs of the body."

JOHN H. PACKARD,—

Insanity is mental disorder, temporary or permanent, by which the judgment or the moral sense is perverted, or the will weakened, so that the opinions and conduct of the individuals are at variance with the common sense of mankind.

As to the question of responsibility: it seems to me a very difficult one to deal with categorically. I certainly do not think a man should be acquitted of proven crime on the ground that his great grandfather was eccentric, even if his brother was epileptic. Each case must be judged for itself. If there is reasonable ground for doubt as to the sanity of a criminal, I think he should be, not acquitted and discharged, but placed under such control and surveillance as should prevent further damage to society from his want of conformity to received standards of conduct.

Believing, as I do, that the efficacy (whatever it may be), of any punishment depends upon its certainty, I think it would be well if the law should consign a murderer of whose sanity there was ground for doubt to confinement until the doubt should be removed. If he proved sane, the confinement might be made to extend throughout his natural life, and if otherwise, be so far moderated as to do away with its penal character. For other offences, I should approve of the friends being required to give bonds for the maintenance of proper safeguards; or of the restraint of the individual in some public institution of suitable character, such as does not now to my knowledge exist.

But the subject is one which cannot be dealt with in any brief space. I think the fact of insanity should, if possible, be clearly proved, and then that society should be protected with as little hardship to the individual as may be.

DR. THOMAS K. CRUSE.—

"Insanity is the psychic manifestation of brain disease."

DR. WM. A. HAMMOND.—

"Insanity is a manifestation of disease of the brain, characterized by a general or partial derangement of one or more faculties of the mind, in

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which, while consciousness is not abolished, mental freedom is weakened, perverted or destroyed."

Dr. Hammond, in criticising Dr. Cruse's definition, says, in the Journal of Pathological Medicine (vol. 6. p. 272):

"If Dr. Cruse's definition were made to read "*A psychic manifestation of brain disease unattended by loss of consciousness*," it would probably be more compact, and fully as logical as any extant.

Dr. Jules Morel, ex-President Society of Mental Medicine of Belgium, writes in answer to the queries:

"As to a definition of insanity, I do not feel able to give one at all satisfactory to myself. We must definitely state what is a perfect state of mental health. Many authorities have already essayed this, but it cannot be done in a few lines.

Till now my studies have not allowed me to either frame or accept an accurate definition of insanity.

As to "criminal responsibility of the insane," I believe quite a chapter must be written to properly define it.

Opinions of the most eminent alienists upon this subject differ widely, and they often follow the personal opinions, the religious feelings and the so-called *progress of civilization*.

We have alienists who consider nearly or all criminals, lunatics!"

A WORD FROM SYRIA.

The following communication has been sent to a member of the editorial staff by a friend connected with the Medical Missionary Service of Syria.

A Word From Syria.—"We are interested in the subject of insanity, and have made many efforts to have an Asylum founded in this country, for nothing of the kind exists in the Turkish Empire. The phase of insanity as developed here will be an addition to your discussion of it in America, and no man in all Syria, perhaps in the Turkish Empire, can find you a more reliable and clean cut treatment of it than Dr. Post. As far as I can understand, the cases here drop into two general classes. Those insane on matters connected with religion, and they are a legion—and those insane from disappointments and trials in life.

"No place of confinement or restraint exists in this country, hence all those considered harmless are allowed their freedom. Those that become violent and dangerous, are *chained in some out-of-the-way hole* and are then

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hopeless. I heard the other day of a woman chained to a wall so long that with her finger nails she had scratched almost through the solid stone.

"They also have a way of beating these afflicted mortals when they become very violent."

BEIRUT, SYRIA.

DR. ORANGE, ON MECHANICAL RESTRAINTS FOR THE INSANE.

DR. W. ORANGE has sent us his retiring report for 1885–1886. Submitted May 26, 1886, of the Broadmoor Criminal Lunatic Asylum of England. It contains the following sentence: "*It was not found necessary to employ any form whatever of mechanical restraint during the year.*"

Let Superintendents of Asylums in America and Canada, read and reflect upon these splendid words from the foremost alienist in Great Britain, who retires from active duties near the close of a remarkably successful career, with the confidence of the English Government, and the universal respect of his cotemporaries.

PENSIONS BY THE STATE TO DISABLED ATTENDANTS UPON the INSANE.

The same report shows that an attendant at BROADMOOR was struck on the head with a chair and the resulting injury made his retirement necessary.

He had been in the service fifteen years and a pension was awarded to him on his retirement of thirty-eight pounds, twelve shillings and seven pence. We commend this example to our State Legislature, and for two reasons.

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1. To make an amount of pension, depend on length of service is promoting good service.

2. Pensioning disabled attendants by law, raises the standard of service, and protects them in case of injury.

If Superintendents of Asylums will support such a measure, we shall urge it upon State Legislatures.

If this be good doctrine for attendants in Asylums, it is also good for Superintendents and medical officers in State Institutions.

DR. ORANGE'S retirement is enforced by an injury he received in 1882 from an insane patient.

DR. GRAY of Utica Asylum, was a similiar case nearer our own doors.

We need not cite others quite as startling and cogent. We favor State pensions to Medical Officers in Institutions for the Insane, disabled by insane inmates, to be regulated by Statute law.

BELGIAN LUNACY COMMISSIONERS.

By a Royal decree of the 3d April, 1887, the Government of Belgium has made an important change in the general supervision and inspection of the Belgian Asylum for the Insane.

Three Commissioners are named by the Crown entitled d'inspecteur adjoints, whose duties are to supervise and inspect the Insane Asylums of the Kingdom.

Each Commissioner makes annually a report of his own labors.

The three Commissioners form a Commission analogous to the English Board of Lunacy Commissioners.

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Its powers are quite broad, over the supervision and inspection of the State Institutions, and it is required to make recommendations to the Government, in respect to the internal and domestic management, and to take charge of Statistical matter.

It meets quarterly, and its members preside alternately each year, as well as alternating in like manner in the Secretary's duties, the order of which is fixed by lot.

This Board makes an annual Report to the Government, to which are attached the individual reports of each member.

The Commission named by the decree are :

D. LENTZ, Medical Director of the Belgium Asylums, of TOURNAI.

JULES MOREL, M. D., Superintendent HOSPICE de GUISLAIN, late President of the Societe de Medecine Mentale de Belge, of GHENT.

DR. A. VERMEULEN, Superintendent of Female Insane Asylum of "STROP A GAND."

The two former members of this Commission are Corresponding members of the Medico-Legal Society of New York.

INTERNATIONAL MEDICAL CONGRESS.

We hope to see DR. JULES MOREL, the distinguished Belgian savant and alienist, in this country on the occasion of the International Congress.

From recent letters we infer he may conclude to visit our country as well as several other distinguished men

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from other countries, also corresponding members of the Medico-Legal Society.

Among those announced as coming are DR. D. HACK TUKE and GEORGE H. SAVAGE, of London.

DR. A. LUTAUD, of Paris, PROF. DR. L. LEWIN of Berlin.

THE BELGIAN SOCIETY OF MENTAL MEDICINE.

This society, at its January session, 1887, made a change in its statutes regarding its officers, and the division of labor among its secretaries.

It decided to have a Secretary, a Treasurer and a Librarian.

DR. F. LENZ, of TOURNAI, was chosen Secretary.

DR. JULES MOREL, of GHENT, was elected TREASURER, and also LIBRARIAN.

MEDICO-LEGAL SOCIETY PRIZE FOR AN ESSAY ON ANY MEDICO-LEGAL SUBJECT.

The Medico-Legal Society of New York, at its May Session, upon the recommendation of its Executive Committee, unanimously authorized two prizes to be announced. First, of $100.00; second, of $50.00 for the best Paper on any Medico-Legal subject, to be awarded by a committee to be selected by the President of that body.

The details will be hereafter announced, as well as the names of the Committee of award. Mr. Elliott F. Shepard has contributed $100 for a special prize and the fund for the prizes is raised by contribution of members.

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Female Physicians In Insane Asylums

We think a large majority of those superintendents of American Asylums who have given the subject attention favor very strongly, the placing of the female insane under charge of female physicians.

Among those experienced in charge of the Insane in Institutions, who have publicly avowed it, are Dr. H. R. Stiles, Dr. W. W. Godding, Dr. C. H. Hughes, Dr. D. Hack Tuke, Dr. W. B. Goldsmith, Dr. P. M. Wise, and many others.

The New York Neurological Society, while having few superintendents of Asylums among its members, are, we understand, in favor of it.

Dr. Stephen Smith, the State Commissioner of Lunacy, strongly favors it.

Some of the States have provided for it by law. The movement was originated by scientific men as a step forward, not only in the advancement of science, but in the welfare of the Insane, and it is not a movement by women as such.

The Pennsylvania plan at Norristown, of placing a woman physician at the head of the female wards, has, under the able administration of Dr. Alice Bennett, proved in all ways a success. The labors of Dr. Margaret Cleaves, and of Dr. Jane K. Carver, have received favorable recognition from the profession, so far as we have knowledge.

When general recognition by State authorities, and superintendents of Asylums of the doctrine, that a com-

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petent woman Physician should have charge of the female insane is reached, we shall have achieved a substantial and permanent good to the insane themselves, and taken an important forward step in the amelioration of their condition.

DR. H. BUTTOTPH, the President of the ASSOCIATION OF AMERICAN Superintendents of INSANE ASYLUMS, will make his Presidential address, at the coming Session, upon "INSANITY or MENTAL DERANGEMENT, with remarks on its *nature, causes, classification, pathology*, and *symptomatic forms.*"

The Doctor embraces a wide field and we have no doubt his paper will excite great interest.

BRUTALITY OF ATTENDANTS TO THE INSANE.

A Coroner's Jury after investigation has found that B. G. Peadroe, an insane inmate came to his death at the Illinois Southern Insane Asylum at Anna, Illinois, by injuries inflicted by attendants.

The body was exhumed, and an autopsy showed the left cheek bone crushed and other evidences of violence.

The verdict of the Coroner's Jury in New York on June 15, 1887, finds that George Farrish, an insane patient at Ward's Island, came to his death by injuries inflicted by attendants McCue and Cleary. The post-mortem on exhumation of the body disclosed nine ribs broken, and a tenth displaced, with other marks of violence. McCue and Cleary were committed by Coroner Levy without bail.

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The fact that such atrocities can be perpetrated and the bodies buried without the knowledge of the Superintendent in charge in these large institutions, and the attendants kept in place, is a remarkable commentary on our present system. The case of Evans D. Hughes, at Utica is a similar one, and the recent one at Buffalo State Asylum.

What can be done to prevent the recurrence of such atrocities? Superintendents of asylums everywhere should give the subject attention, as these scandals seriously prejudice our citizens against large institutions, where such crimes can be committed and escape even the knowledge of the Superintendents. The evil cannot be as well remedied by legislation as by extra vigilance of medical officers in charge.

It is one of the most important subjects that can come before the National Association of American Superintendents of Insane Asylums.

COLONIAL AND INTERNATIONAL CONGRESS ON INEBRIETY.—This Congress will be held in London on July 6th at Westminster Town Hall, Caxton Street, under the presidency of Dr. NORMAN KERR, and a list of vice-presidents selected from the English Colonies, America, Belgium, Denmark, France, Germany, Holland, Norway and Sweden.

Dr. JOSEPH PARRISH will read a paper entitled, "Have Inebriates a Climacteric Period?" He sailed June 8th. Dr. T. D. Crothers will read a paper, and the Editor of this Journal a paper entitled, "The Relation of Inebriety

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to Insanity." The conference will be followed by a banquet.

STATUE TO GUISLAIN.—The unveiling and inauguration of this statue will be celebrated next month, and the Medico-Legal Society has been invited to take part in the imposing ceremonies.

President Clark Bell has been selected as the representative of that body, and empowered to officially appoint other representatives from our members now abroad or intending to go.

Hon. David Dudley Field, T. D. Crothers and Dr. Joseph Parrish will be appointed as delegates, all of whom are now in England. It will be a notable event for Belgium.

MEDICO-LEGAL PAPERS, SERIES 4 AND 5.—Members of the Society and others who have not subscribed for these volumes, are desired to do so. The list of subscribers at the present time is as follows :

NOTE.—Members and others desiring to subscribe to this movement will please advise the editor of the JOURNAL, or any officer of the Society. The following is the subscription at the date of March 1st, 1887 :

MEDICO-LEGAL SOCIETY.

The undersigned hereby subscribe for and agree to take of the Medico-Legal Society, or its assigns, the number of copies of Medico-Legal Papers, Series 4 and 5, to the commencement of Medico-Legal Papers, at the price of $3.50 per volume in cloth, or $2.50 in paper, provided at least sixty copies are subscribed for.

Dated January, 1887.

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Authors of papers will please communicate with the Publication Committee, consisting of R. S. Guernsy, Esq., R. B. Kimball, Esq., and Clark Bell, Esq.

It is hoped that at least 100 subscriptions will be secured, to warrant engaging a publisher.

GROWTH OF THE MEDICO-LEGAL SOCIETY.—We give a list of the members that have been elected since January 1, 1887, including the June Meeting, a little less than six months.

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Active Members.

E. B. Shafer, Esq., Cornelius A. Runkle, Esq., Delancey Nicoll, Esq., C. Bainbridge Smith, Esq., McKenzie Semple, Esq., Isaac Angel, Esq., Daniel R. Lyddy, Esq., Amelia Wright, M. D., James M. Lyddy, Esq., Seneca D. Powell, M.D, D. G. Crosby, Esq., Charles H. Tillotson, Esq., Robert Milbank., M D, E. W. Chamberlain, Esq., Henry S. Bennett, Esq., Eliza A. Connor, Chas H. Blair, Esq., Ed. J. Morgan, Jr., M. D., O. H. LaGrange, Esq., Judge Jno. R. Dillon, J. D. Roberts, M. D., Judge J. H. McCarthy, M. Louise Thomas, W. W. Strew, M. D., Ed. J. Cowles, M. D., Louis Livingston Seaman, M. D., Judge A. Dittenhoffer, Col. Ed. C. James, David Tomlinson, Esq., John S. Lindsay, Esq., Wm. C. Burke, Jr., M. D. Hon. Oscar Strauss, Dr. Geo. Knickerbocker, Wm. J. Best, Esq., Eliza M. Mosher, M. D., Lucy M. Hall, M. D., Robert G. Ingersoll, Esq., J. V. Stanton, M. D., Geo. D. Clift, M. D., Ephraim Cutter, M. D.

Corresponding Members.

R. S. Sutton, M. D., Judge Chas. H. Daniels, Hon. D. Lentz, Norman Kerr, M. D., Prof. Paul Kowalewsky, Dr. F. Lentz, Prof. Dr. P. Heger, Senator Andrea Verga, W. H. Taylor, M. D., J. G. Pinkham, M. D., P. O. Hooper, M. D. Chas. W. Moore, M. D., Walter Channing, M. D., Dr. Giulio Chiarugi, Prof. Enrico Torrini, W. H. S. Bell, Esq., Edward Nettleton Blake, Esq., John Kinmot, Esq., Dr. Jose Monteros, making in all a total of 59 new members, two of whom were proposed by Dr. Isaac Lewis.

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Peet, two by Mr. Albert Bach, one by Dr. S. N. Leo, one by Dr. Fer'd C. Valentine, one by Dr. Chas. F. Stillman, one by Simon Sterne, Esq., and 51 by the President of the Society, Clark Bell, Esq.

THE DRUSE CASE.—We regret that want of space necessitates condensation of Mr. Chamberlain's thoughtful paper on the Druse Case, and compels the omission of several points, which in the paper as read, were elaborated at too great length for our columns. Mr. Chamberlain insisted upon more general education in sexual physiology, and sex relations, as a means of preventing such conditions, as led to Mrs. Druse's crime, and spoke at length of the effect of newspaper reports of executions, upon women, and especially upon pregnant women, and their offspring. He maintained that the infliction of revengeful punishment by the state upon a citizen who has worked out the undeviating consequences of conditions, for which the State is responsible, is as repugnant to good morals, as it is detrimental to good government, and that the authority which punishes crime, without seeking to remove its causes, is brutal, not enlightened. He also pointed out at much greater length than we have been able to print, what he claims was the Governor's misapprehension of his official functions, and characterized as mockery the Governor's suggestion of a bill to exempt women from capital punishment.

The paper of Mr. Chamberlain gave rise to an animated discussion in the Society. The action of the Gov-

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ernor being warmly defended by RICHARD B. KIMBALL, DR. J. N. CARNOCHAN, President CLARK BELL, and others.

We incline to the view that GOVERNOR HILL will in future years regret that he did not commute the sentence of MRS. DRUSE.

The popular clamor of citizens of HERKIMER, her past life, or the currents of popular feeling, ought not to control executive clemency. Many of the facts of the case are obscure, but the majority of disinterested citizens of the State, outside of the section where the crime was committed, felt it to be a case peculiarly proper for Executive Clemency.

If it were an error to commute her sentence, it would not have been as fatal as the error of refusing to act, which if a mistake, could not be atoned.

The effect of her execution, when the similar atrocious case of UNGER, who was tried in New York, escaped hanging, leaves an unpleasant feeling in the public mind, and the public conscience and heart would have been more gratified had this unfortunate woman joined others who are now serving life sentences for homicides in prison, rather than to have perished on the scaffold.

PERIODS FOR MENTAL LABOR.

DR. BENJ. WARD RICHARDSON.—In January *Aclepiad* is of the opinion that from five to six hours is the natural limit of mental labor for the healthiest writer, and that it is wiser to divide this with at least one hour of interval for rest between.

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DR. RICHARDSON concurs in the view of Mr. EDWIN CHADWICK on this question—that better work can be done by the same writer, by limitation to five or six hours daily, than by an excess of that amount of time.

Seven hours of sleep, he claims, is necessary and that the brain be kept free from stimulants especially alcoholic.

The best proof says DR. RICHARDSON, that the mind is exhausted from mental work, is the omission of words, in the construction of sentences, taking care that it does not occur from haste in composition.

MEDICO-LEGAL SOCIETY OF FRANCE.

The following officers were elected at the December meeting 1886, for the ensuing year.

President. EMILE HOURTELOUP. of the Paris Bar.

Vice-Presidents Dr. A. Motet, Dr. Grassi.

Secretaries. Dr. Socquet, Dr. Le Blond.

MEMBERS OF PERMANENT COMMISSION.

Messrs. Blanche, Benoist, Jules Lefort.

COUNCIL of MANAGEMENT.

Messrs. Chaude, Liouville, Boudet, Falret, Bouchereau.

PUBLICATION COMMITTEE.

Messrs. Lefort, Megnin, Pouchet, Socquet and LeBlond.

DR. JOHN B. ANDREWS, Superintendent of the State Asylum for the Insane at Buffalo, has been named Chairman of the Psychological Section of the Interna-

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tional Medical Congress, vice Dr. John P. Gray deceased.

Dr. Jules Morel, ex-President of the Belgian Society of Mental Medicine, has been appointed and accepted the Superintendency of the Hospice Guislain at Ghent, Belgium, Vice Dr. B. C. Ingels deceased.

He has also been elected Honorary Member of the Medico-Psychological Society of the Netherlands.

Dr. P. Heger, has been elected President of the Belgian Society of Mental Medecine.

NECROLOGY.

Henry Buist.

Mr. Henry Buist, one of the most prominent lawyers and citizens of South Carolina, died recently at Charleston. He was born at Charleston in 1829, was graduated from the South Carolina College in 1847 and was admitted to the Bar in 1851. He entered the Confederate service at the beginning of the war as captain in the Twenty-seventh South Carolina regiment, Hagood's brigade. He was captured while charging the breastworks at Petersburg in 1864, and held as a hostage on Morris Island. After the war he resumed the practice of law and achieved large success. He was elected State Senator from Charleston county in 1865, and was a prominent Mason, having attained the highest degree. He was Grand Chancellor of the Supreme Council, Scottish Rite, thirty-third degree, and Inspector General of that order for South Carolina.

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Senator Buist was a corresponding member of the Medico-Legal Society of New York, and took a deep interest in its studies. He was a careful student of Medical Jurisprudence, and his loss will be felt among many friends, as well as those of his native State.

JEAN THEOPHILE GALLARD, M. D.

The death of this distinguished man, leaves a vacant place in Forensic Medicine that will not easily be filled. He was General Secretary of the Medico-Legal Society of France from its organization to the day of his death, and was its moving controlling spirit. What Dr. B. C. Engels was to the Belgian Society of Mental Medicine, Dr. Gallard was to the French Society. He was a Corresponding Member of the Medico-Legal Society for many years.

We have received his portrait from his son which we hope to present our readers in the next number, with a sketch of his brilliant and useful life.

PROF. J. S. JEWELL, of Chicago, a neurologist and alienist of distinction, Professor of Neuralgia and Mental diseases in the Chicago Medical College and editor of the *Neuralgical Review*, we regret to learn is dead.

DR. FRANCIS VLEMINCKX, Secretary of the Medical Federation of Brussels, is no more. Dr. Vleminck, was a Medical Jurist of the front rank in Brussels, Belgium, one of the editors of "*Archives l'Anthropologie Criminelle*" at Lyons, France, and for years has been regarded as one of the leading alienists of Belgium.

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DR. FERDINAND HAUSKA. We regret to announce the death of this distinguished man, emeritus Professor of Medical Jurisprudence in Vienna, Austria.

MEDICO-LEGAL SOCIETY OF CHICAGO:

The proceedings of the annual meeting, held June 4, 1887, reached us too late for extended notice in the present issue. The following officers were elected:

President, DR. E. J. DOERING.

First Vice, DR. BOERNE BETTNIAN.

Second Vice, ERIC WINTERS, ESQ.

Treasurer, Dr. L. L. MCARTHUR.

Secretary, DR. SCOTT HELM.

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RECENT LEGAL DECISIONS.

PRIVILEGED COMMUNICATIONS.

Rule where the ban has been removed by the consent of the patient.—Though the information acquired by a physician while attending a patient may, by the statute, be given in evidence only at the option of the patient, yet the ban of secrecy having once been removed by the patient, and the information having lawfully been made public, the right to object further thereto has not been conferred.—McKinney *v.* The Grand Street, Prospect Park and Flatbush R. R. Co., N. Y. Ct. App., 31 Daily Reg., No. 55, 457.

Hypothetical questions properly allowed.—In a prosecution for the murder of an infant child, upon a hypothetical statement of the condition of the body of the child the morning after its death, and also on a *post mortem* examination made four days after its burial, the questions propounded to a physician, examined as an expert: "What, in your opinion, caused the death of the child?" and, "In your opinion is there any disease which would produce death, accompanied by the conditions stated in the hypothetical case, in an infant healthy and all right in every respect at birth?"—were properly allowed and answers thereto were properly admitted in evidence.—People *v.* Foley, Sup. Ct. Mich., 7 West. Rep. 344.

Evidence of commission of another homicide at the same time and place.—Where the deceased was a twin, and both children lay in the same crib in defendant's room, and both died on the same night and were found dead in the same place in which they had been placed in the evening, and at the same time, and upon both were the same marks of violence, which, in the opinion of the physician produced death; and, so far as the statements, acts and feelings of the respondent is concerned, he had the same motive for killing the one as the other of the children; there can be no question of the competency of testimony tending to show that the smaller infant was killed on the same occasion, and it was part of the same transaction, and that the circumstances of such killing were the same; and evidence of such circumstances was properly admitted.—*Ibid*

Rule to be adopted.—Circumstantial evidence is sufficient, and is often more convincing, of the existence of a fact, than the positive evidence of a witness, who may be mistaken, whereas a concatenation of many circum-

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stances, made out by different witnesses, can seldom fail to elicit the truth. But those circumstances should be strong; each should tend to throw light upon the other; and the result of the whole should be to leave no doubt that the offense has been committed, and that the accused and no other could have committed it.—*Ibid.*

Evidence to show the relationship between deceased and accused admissible.—On the trial of a defendant for the murder of his wife, by poison, where the evidence shows that she came to her death by poison sent to her by him, and the question is whether it was sent innocently or for the purpose of taking her life, evidence to show the relation between the defendant and his wife, prior and up to the time when she took the poison, is competent. Evidence on such trial that defendant was, at times very profane to his wife, and frequently made threats in a profane way that he was going to leave home, that the last threat was made about three weeks before her death, and that when appealed to by his mother-in-law not to leave or it would break her heart, he replied that she, the mother-in-law, would have more than that to break her heart, is admissible.—McMeen *v.* Commonwealth, Sup. Ct. Penn., 5 Cent. Rep., 887.

Liability of patient to physician on implied promise for reasonable value of services.—Where a consulting physician renders medical and surgical service to a patient with his consent, and without objection or notice services are to be paid for by the attending physician, the law raises an implied promise on the part of the patient to pay him what the services are reasonably worth; and to overcome such promise, where a different arrangement was claimed to have been made for the payment of such services, it must be proved by satisfactory evidence that the physician knew of it, and either expressly or impliedly assented to it.—Garney *v.* Stadler, Sup. Ct. Wis. N. W. Rep., 787.

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TOXICOLOGY.

The Post Mortem Imbibition of Poisons.

By George B. Miller, M. D.

* From the *American Naturalist*, Feb'y, 1886, Vol. 20, No. 2.

The subject is one not only of a highly interesting character to the scientific observer, but also an important one from its medico-legal aspects. Perhaps the questions which very naturally first arise, viz., What is its nature and what are its medico-legal relations? can be best answered by the following hypothetical case, which it is hoped will serve to illustrate the subject in such a manner best calculated to aid in its thorough comprehension.

Suppose a person dies of a natural cause, and is buried in the usual manner in conformity with the established customs of his country, the body to all external appearances not having been tampered with. Also, that, after the lapse of a few weeks, an individual who had previously introduced into the body, per mouth or rectum, a poison or poisonous solution for the purpose of accusing an innocent person of a horrible crime, should quietly circulate a report that the deceased had been poisoned, and intimate that the crime had been committed by such and such a person. With what remarkable lightning rapidity does a report of such a sensational character as this travel from one individual to another, rarely ever finding the doors barred, the contrary being the rule! This report would in a short space of time reach the tribunal of justice, cognizance would be manifested by the proper authorities, who would order the body to be exhumed, the various organs removed and given in charge of a reliable expert, who would subject them to a chemical analysis, which would reveal the presence of the suspected poison. The subject is not of very recent date as many are led to suppose from the meagre accounts given, if given at all, in some of the standard text-books on toxicology of the present day. As far back as the time of Orfila, when he swayed as chief of the toxicologists, was the subject

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known, and indeed it appears that almost cotemporaneous with the birth of toxicology, already an account of the subject appeared.

In order to see in what light the subject was regarded in former times, extracts from the writings of a few authors will be here made, as to go over them all would involve a great amount of unnecessary labor. How eloquent is the language of Orfila on the subject, and in what an exceedingly small number of words does he illustrate the whole subject (Orfila on Poisons). He writes: "Suppose some wretch, with the design of accusing an innocent person of the crime of poisoning, should introduce into the digestive canal of a dead body a poisonous solution, which would afterwards penetrate by imbibition even to the remotest organ from which it would be subsequently extracted by the experts, and would lead them to the conclusion that they were dealing with a veritable case of poisoning." From the following it will be readily seen that the celebrated chemist, Sir Robert Christison, although not in possession of any evidence of crime having been practiced, yet was fully aware of the circumstances under which it might perchance be committed. Says Christison: "Although I have never been able to find any authentic instance of so horrible an act of ingenuity having been perpetrated, it must nevertheless be allowed to be quite possible."

The realization of the greatness of the crime does not seem to be apparent to the wretch who is meditating the commission of it, brooding over the insults of another, and holding malice against a fellow-man or especially (as it affords a better chance for the full performance of his crime), against one of his relatives, and ravenously seeking retaliation; for if it was realized, how is it possible that an individual, capable of the perception of right and wrong, living in society, constituting a part thereof, mutually dependent on and co-operative with his neighbor, could use such means for the wicked furtherance of his ends?

That there have existed in times past among the communities of the civilized nations of the world, individuals who have harbored such hatred toward their fellow-men that they have not faltered in carrying their intentions into practice, is manifested by the defences set forth in the trials of various murder cases, which are recorded in the annals of the tribunals of justice, not only of the New but also of the Old World.

That in a number of murder cases the defence has been that the poison was designedly introduced into the dead body for the purpose of crimination is made apparent by the narration of the following cases: Professor John J. Reese, M.D., in his article on the Post-Mortem Imbibition of Poisons (Transactions of the College of Physicians and Surgeons, 1877), relates a remarkable case of alleged arsenical poisoning, which occurred in one of the Western States. The suspicions were exceedingly strong that the poison was introduced after death for various reasons. The old man having

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been treated in his last illness for phthisis, his physician testifying to his having died of this disease, and to his having presented no symptoms of arsenical poisoning before death.

The body was buried four (4) years, during which time no suspicion of foul play appears to have been entertained. In the meantime, the widow again married, and the suspicion of poisoning was bruited about. The woman was accused of the crime, the body was exhumed, and a chemical analysis revealed the presence of this poison in the stomach and liver.

The defence was that the poison was designedly introduced into the body not very long before the disinterment, the body being kept in a vault. The case, singularly enough, having had a preliminary hearing, was abandoned.

Illustrative of the same, we have an article by Dr. Victor C. Vaughan (physician and surgeon, Ann Arbor, Michigan, Aug. 1883): "During the past six months there has been tried in this State a murder case, in which the question arose whether arsenious oxide could diffuse after death, after it had been mixed with water, and injected into the rectum or mouth, or both."

Since direct experiments by others, and by the author himself, as will be seen hereafter, seem to prove that the absorption of poisons after death does take place, it must necessarily become an important factor how in such cases to differentiate ante-mortem from post-mortem poisoning. The methods are very limited. Perhaps the most reliable as well as the most conclusive evidence of anti-mortem poisoning are the symptoms manifested by the patient before death. Of little less importance is the revealing of the presence of the poison by chemical analysis in the interior of a large organ, as for instance, the liver; since it does not appear to be likely that a poison introduced after death could penetrate by imbibition even to the interior of so large an organ. That Professor Reese attaches much importance to the detection of the poison within organs will become evident by the following extract from the article before mentioned. Says Professor Reese: "If the poison were found on the exterior of the organs only, and not in their interior, after a careful research, I should regard it as a true case of 'Post-Mortem Imbibition.'"

In this connection a digression may be allowable relative to the impregnation of a dead body from arsenical soil into which it is sometimes unfortunately placed. In those cases, where owing to suspicions of poisoning, it becomes necessary to disinter a body for legal purposes, it is often found that the coffin in which the remains are deposited has burst open, thus allowing the contents to come in contact and mingle with the soil (which in some rare instances contains arsenic). At the trial of these cases the counsel for the defendant, hard pushed for a defence, and whose only resource lies in a choice between "insanity" and "arsenical impregnation

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from the soil," in some cases selects the latter. The actions of lawyers in setting forth such groundless defences, being cognizant of the impossibility of the transudation taking place, and living in the light of present scientific knowledge, might be looked upon as of doubtful propriety Unfortunately, in order to show that such a course is frequently pursued, it is only necessary to search the actions taken by the Commonwealth in the trial of cases of this nature, when it will be found that along with a chemical analysis of the organs, there is also a chemical analysis of the soil. Indeed, this mode of action was taken in a recent case of arsenical poisoning occuring in this city (Philadelphia), in which the prisoner, although twice convicted, has not as yet been sentenced, on account of the existence of some of the so-called "technicalities." From the following opinions of certain toxicologists who have made it a study, it will be seen that it is regarded as impossible for this contamination to take place.

Professor Reese (Proceedings of College of Physicians and Surgeons, 1877) says: "In the few cases in which arsenic has been discovered in cemetery soils, it has invariably existed in the insoluble state generally in combination with either lime or iron. Indeed, it cannot be extracted from such soils even by boiling water, but the agency of hydrochloric acid is required to render it soluble; consequently, it is impossible that arsenic should be capable of transudation from the soil into a dead body."

This assertion is corroborated by the direct experiments of Orfila (Acad. of Med., June 29, 1847), who showed that bodies buried in arsenical earth for a period of three (3) months, did not acquire any arsenical impregnation from arsenical soil. But even admitting that it is possible for a body to become impregnated from arsenical soil, it could be easily determined in case a body contained arsenic, whether it derived the poison by contamination with earth, or whether the poison was introduced into the body; by taking two samples of earth, one from the immediate contact with the coffin, and the other from the same strata, but in an adjacent portion of the cemetery, and subjecting both to a chemical analysis; if the analysis revealed the poison in the coffin soil, and not in the adjacent soil, then it would be evident that the soil was contaminated by the body and not the body by the soil.

With a view of determining whether it is possible for a poison introduced into a dead body, to penetrate through the various organs, and be recovered by chemical analysis, a series of experiments were conducted.

A small dog was killed, and into the stomach was introduced, by means of a flexible catheter, two ounces of water containing twenty grains of arsenious oxide. The animal was placed in a pine box, buried, and at the expiration of sixty days was exhumed. The following organs, viz., the stomach, liver, kidneys, lungs, heart and brain, were then removed. On the surface of the organs were observed brownish-black spots. The organs

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were found to be in a remarkable state of preservation, especially the kidneys. The brain was only slightly broken down, but the dura matter was intact. A bright yellow spot of the size of a small pea was observed on the urinary bladder.

The organs removed were placed in separate glass jars, and then subjected to a chemical analysis. The process employed for the recovery of the arsenic being the "Frenious and Babo" or the hydrochloric acid and potassium-chlorate method, with the purification method of Otto. These are as follows: "The organ is cut into small pieces, and hydrochloric acid and water added. The mass is heated to near but not quite the boiling point on a sand bath. Potassium chlorate is added, in portions, the mass being stirred continually. The chlorine evolved disintegrates the organic matter. The mass is stirred and heated until all the chlorine is driven off, and becomes homogeneous. The volume is kept up by adding water. Allow to cool and transfer to a moist linen strainer, and strain until the filtrate is clear, restraining all that is turbid. The residue is washed well with water. The arsenious oxide has been oxidized by the potassium chlorate to arsenic oxide. Reduce to arsenious oxide by adding an excess of a solution of sulphurous acid gas, the excess of gas being known by the odor.

The mass is evaporated to twice the volume of hydrochloric acid used; cool and filter if necessary. Thoroughly saturate while warm with a washed stream of sulphuretted hydrogen, which will throw down the arsenious oxide, oxide, organic matter, sulphur and the sulphides of other metals. Filter, wash the residue until the washings are free from chlorine. The residue is washed with a few c. c. of water containing ammonium hydrate. The sulphide of arsenic will be dissolved by the ammonia water and pass through. Evaporate to dryness in a water-bath, and add a few drops of nitric acid to destroy the organic matter; the nitric acid will also oxidize the sulphide of arsenic to arsenic oxide. Evaporate to dryness and repeat until the mass has a yellow color. To the dry residue add a small quantity of a solution of potassium hydrate and powdered carbonate of soda, and evaporate again. The potassium hydrate will combine with the arsenic oxide, forming potassium arsenate. Evaporate to dryness, and add three or four drops of concentrated sulphuric acid. Heat on naked flame until vapors of sulphuric acid cease to arise. The sulphuric acid will clear the organic matter. Pulverize the residue if necessary, add 25 c. c. of water, and one drop of sulphuric acid to acidulate. Boil and filter. The filtrate which contains arsenic oxide should be *colorless*. Reduce arsenic oxide to arsenious oxide by an excess of a solution of sulphurous acid. Concentrate until all of the sulphurous acid is gone, and about 20 c. c. remain.

The reagents employed in the extraction of arsenic, themselves frequently contain this substance, notably those of zinc and sulphuric acid;

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hence, it becomes necessary to test all reagents to determine that they are absolutely free from this poison. None but "chemically pure" reagents were employed, the sulphuric acid being found to be such after subjecting it to Marsh's test. On the application of Reinsch's test to the hydrochloric acid and copper foil, they also proved to be reliable. *Summary of results obtained by chemical analysis of the organs removed from dog containing arsenic:* The extracts obtained from the stomach, liver, kidneys, lungs, heart and *brain* were subjected to Reinsch's test, and from *all of these organs arsenic* was recovered. In each case a sublimate was obtained on the side of the reduction tube, which, placed under the microscope, revealed the presence of arsenic by exhibiting many beautifully formed octohedral crystals. It should be remarked that the results obtained from the examination of these organs were about equally striking, with the exception of the brain, which gave somewhat less marked reactions.

On examining the literature of the subject of the "Post-mortem imbibition of poisons," it will become apparent that it has not received the amount of attention it so justly deserves. Indeed, so far as the writer has been able to learn the only investigations pertaining to the subject are those of Drs. Victor C. Vaughn, Kedzie and George McCracken.

Dr. Vaughn in the first of his experiments (physician and surgeon, Ann Arbor, Michigan, August, 1883), used a musk-rat injecting into the mouth and rectum by means of a syringe fifty (50) grains of arsenious acid suspended in cold water. The rat was buried twenty-five (25) days, and the organs subjected to a chemical analysis, which revealed the presence of this poison in the kidneys, liver, lungs, stomach and contents, large intestine, small intestine, heart and brain. In his second experiment a cadaver was used, an unweighed quantity of arsenious oxide was introduced into the mouth and rectum, the body being then placed in a cellar for twenty-five (25) days. The brain was broken down, and in a semi-fluid condition, the rest of the organs firm. Chemical analysis revealed the poison in the right and left kidney, liver, lower lobe of right lung, heart, rectum, spleen, stomach and brain.

Dr. Kedzie, of the Michigan Agricultural College, working independently, made experiments on a cat with like results. In again referring to the results of the experiments by the writer, it will be seen that arsenic was recovered from the *brain* of the animal into which this poison had been introduced. The fact that a poison, introduced after death, can penetrate through the various tissues and saturate the great nerve centers, protected and surrounded as they are by a bony casing, must be looked upon as an astonishing as well as an interesting fact. Upon this point Dr. Reese (Transactions of College of Physicians and Surgeons, 1877), observes: "It is scarcely conceivable that a poison introduced into a body after death could penetrate by imbibition within the cavity of the cranium and spinal cord."

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In the experiments of Dr. Vaughn, the following explanation is offered for having found arsenic in the brain, viz., "In injecting the solution into the mouth, the syringe used clogged up, and on attempting to force it free, a portion of the fluid was observed to flow from the nostrils, some of this fluid probably adhered to the pharynx."

In the writer's experiments, when the dog employed was being placed in the box, a small amount of fluid was observed to trickle from the nostrils. Whether the presence of arsenic in the brain was due to the foregoing accident or not is uncertain. In a series of experiments on "Post-Mortem Imbibition of Poisons," Dr. Geo. McCracken introduced the three poisons, viz,, arsenic, tartar emetic and corrosive sublimate, and subsequently recovered them by chemical analysis from several organs.

Though always allowable, it is not our purpose to attempt to draw positive deductions from the facts adduced, but rather to allow our own results, which have been gained by a strictly scientific process, *to speak for themselves.* In conclusion, however, it may be remarked that the hypothesis that arsenic through the process of post-mortem imbibition from the alimentary canal is, by careful chemical analysis, discoverable in the brain, *receives* entire confirmation from the present researches.

The supposititious case submitted by DR. MILLER in the foregoing interesting paper, the case cited by Prof. John J. Reese, the dicta of ORFILA and of ROBERT CHRISTISON and the more recent case cited by DR. VICTOR VAUGHAN, of the murder case in MICHIGAN, raise Medico-Legal questions of great interest to Medical Jurisprudence, and should awake careful research by Toxicologists :

How can the chemist discriminate from a scientific examination of the cadavre at the autopsy, whether the poison was administered before, or after death ?

DR. MILLER seems to be of the opinion, that the absorption of poisons take place after death; he calls attention to indications by which it can be discriminated; and cites PROF. REESE'S opinion, that the location of the poison, if found in the exterior of the organ, indicates *post mortem* imbibition, if in the interior *ante mortem* poisoning.

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Both REESE and ORFILA agree, that the cadavre could not absorb from the soil sufficient arsenic, to have caused death if taken internally during life, but the experiments made by DR. VAUGHAN, DR. KEDZIE, and DR. GEORGE MCCRACKEN, would strongly tend to prove, that arsenic introduced after death by mouth or rectum, would pass into the organs by absorption.

This question is doubly interesting from its importance in another class of cases, to which we desire to call the attention of chemists and toxicologists throughout the world.

The writer has been consulted professionally on a case presenting the following singular circumstances.

An elderly prepossessing man, marries a wealthy maiden lady, evidently for her money. After a time she dies, with many of the symptoms of arsenical poisoning, her physician is wholly baffled as to her disease, not, of course suspecting poison, as the husband is a clergyman having the full confidence of the community, though the wife, shortly before death, had requested a female relative, not to leave her alone with the husband, but without disclosing the nature or character of her suspicions, if she entertained them.

Immediately after death in a country village, the husband orders the body to be embalmed, and the whole abdominal cavity is filled, with a solution containing an unusually large quantity of arsenic.

Facts and circumstances, satisfy some of the relatives of *ante mortem* poisoning, and arouse strong suspicions of others, but the body was buried without an au-

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topsy. The solution—assuming that arsenic would absorb after death—would of course thoroughly impregnate the organs with more than sufficient arsenic to cause death. In other words an analysis of the body *post mortem* would show arsenic, in large quantities, and more than enough to cause death.

The question submitted to the chemists who were consulted was: "Can you discriminate by chemical analysis, on an exhumation of the cadavre, between the arsenic we are sure to find therein, that which was produced by absorption *post mortem* in the embalming process, from the arsenic or other poison given before death, and which undoubtedly caused death?

Can the chemist by any means now known to science, detect the murderer who poisons his victim, and at once, thereafter fills the body with an arsenical solution under the pretense of embalming it, using an extra large quantity purposely?

In the case under consideration, a strong array of circumstantial evidence was accumulated, aside from the conduct of the husband, evident suspicions of the wife, the opinion of the medical men, and the symptoms of arsenical poison, prior to, and immediately preceding death.

A relative set on foot an inquiry, which showed that the husband had made several marriages before, in two of which deaths had occurred, in a similar manner, immediately followed, by a like process of filling the abdominal cavity with arsenic in strong solution, under pretense of embalming, but no criminal investigation

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or judicial proceeding had been instituted, though strong suspicions, had been entertained by the relatives of one of the former wives.

The medical men, and chemical experts consulted in the city of New York, while entertaining little doubt of the guilt of the husband, regarded the difficulty in fastening the crime upon him, by the analysis so great, as to dissuade the relatives, from an arrest and the scandal of a trial.

He has thus far escaped even an arrest, and has since though quite old, again married in a remote section of the country. The relations of all the dead wives, will, no doubt, watch this clerical Blue Beard's course, and the last wife's death, with interest, to see if a similar course is pursued. The scientific interest in the question which is presented to chemists throughout the world is :

How can we discriminate so as to detect and differentiate the poison, taken *ante mortem*, which caused death, from the poison purposely introduced after death into the abdominal cavity or per rectum, for the purpose of hiding the crime under the pretense of embalming the body ?

The experiment should be conducted carefully with each kind of cases, upon animals, and the differentiation carefully noted and studied, and the discrimination should be most thorough and ample. We shall publish with pleasure, any communication made to us by chemists throughout the world, upon the subject. If this differentiation can be accurately made, so as to justify the toxicologist in swearing positively, and to take the case

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out of the realm of uncertainty, so that the jury would not be in sufficient doubt to give its benefit to the accused, it would in the case in point bring this clever scoundrel yet to justice. There is sufficient arsenic in that body to preserve it perfectly for years, and the analysis could be made in the future as well as now, or in the past. His only escape would be to steal the body, which could hardly be done, and if done, would furnish a still farther link in the very strong chain of circumstantial evidence, surrounding the case.

Notice to Members of the Medico-Legal Society.

The Treasurer advises members of the Medico-Legal Society, that he has not sent the March number of the Medico-Legal Journal to those members who are in arrears for dues, acting under the direction of the Executive Committee.

Members in arrears for dues will receive the Journal promptly on receipt of their dues by the Treasurer.

Dr. S. N. Leo,
103 West 55th Street.

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TRANSACTIONS

MEDICO-LEGAL SOCIETY.

DISCUSSION OF MR. E. W. CHAMBERLAIN'S PAPER ON THE "DRUSE CASE."

(*February Meeting*, 1887.)

President CLARK BELL, Esq., in the Chair.

Mr. R. B. KIMBALL.—Mr. President: Without discussing the propriety of the conviction of Mrs. Druse, although I might have something to say on that subject, I must object to Mr. Chamberlain's criticism, upon his profession and my profession, and also his strictures in regard to the jury system, in which, permit me to say, I cannot agree with him.

Again, I do not agree with him, in the way that he has presented the case of Mrs. Druse, or in his criticisms, upon the opinion of the Governor, which I conceive to be manifestly unjust.

I do not believe in that way of presentation, of the case to this learned and scientific body.

If we go into the period called change of life in a woman, which comes at about forty-five, like the grand climacteric in man at sixty-three, I say simply that the change is a natural one. If I am wrong, my friend Dr. Carnochan is here and can put me right, but I doubt if one woman in ten thousand, goes crazy when the change comes.

Beyond that, I cannot agree to the slur upon our judiciary. I am free to say that there is a great temptation for the District Attorney, in possession of a cause for the people, to do his best to convict, when he ought not to be carried away by any ambition on that subject, but I do not believe that the judiciary, are carried away by any such feeling. On the contrary, I think that the charges of our judges, in criminal cases, are essentially fair, and felt to be so by our professional men, and I am very sorry to find one here to-night that thinks differently.

I put in my protest, not in regard to the Druse case, but to the general case, where I think our friend has travelled out of the way to thus attack our profession, the jury system, and the judiciary, and has made besides a little mistake, so far as women are concerned upon the change of life.

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Beyond that, so far as personal feelings are concerned with regard to Mrs. Druse, and so far as the question of sex is concerned, the subject challenges all our sympathies—but I must protest against our friends traveling out of the record—with regard to our judges being determined to convict, which I do not believe, and with regard to the feeling and uncertainty of juries.

Now, with that exception, I would heartily vote, or move, indeed, a vote of thanks for the information which we have all received in regard to this case.

Dr. PEET.—After all, whether a man is sane or insane, human life must be protected, and it is, perhaps, a sentiment in the community, that too much stress must not be laid on the side of clemency; that we should not allow the law to be abused by the specious explanations, which are made in behalf of a criminal, and the community feels safer when they know that the judges and the governor and all the officers of law are inexorable, and that it requires a very great burden of proof to relieve a criminal—a person who has performed a criminal act—from the responsibility of that act, and there is very great danger, in our going too far, in the matter of excusing men and women, on the ground of their having been actuated by an insane impulse.

Now, in regard to the great case of the murder of President Garfield, I had this feeling, that probably the assassin may have been an insane man, and yet I believe that there will be fewer murders by insane men, than there would be if Guiteau had not been punished. I believe there is a border land, where a person subject to insane impulses, can control himself, and the punishment of that class of persons, forces them to restrain themselves, from the commission of an act, towards which their impulses lead them.

But there are cases in which all the circumstances of the crime, show that the treatment of the person, who at last was wrought up to the commission of the crime, was such as for the time to deprive them of reason, and to deprive them of all ability of self-control, and I regard that case of Walworth, who killed his father, as just such a case. This father of his, had abused his mother, had written her letters, had thrust matters upon her which caused her such distress and anguish, that it became almost insupportable.

This young man was devoted in his affection for his mother. He felt with her, sympathized with her. He was naturally of a morbid disposition, and finally, as a culmination of the abuse, which his mother had received, he was driven mad.

That was my view and I had this view, that if Charles O'Connor had shown a little warmth of feeling, and knew how to appeal to the sentiments of a jury, and had said: "Gentlemen, is there a single one of you, who would not have done the same thing under the same circumstances?" he would have carried the jury with him.

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The result was that the young man did die insane. He was not acquitted on the ground of insanity, but was convicted and sent to prison, but while in prison he was proved to be insane.

Mr. ALBERT BACH.—Mr. President, it seems to me that the paper with which we have been favored this evening should suggest thoughts different from those expressed by the two gentlemen who have preceded me, and while I heartily agree with Mr. Kimball in certain of his protests—and with the utmost courtesy for the reader I say it—at the same time it strikes me we should consider how to try the question of sanity or insanity, rather than the peculiar facts of the case referred to.

The question of sanity or insanity, is one which has troubled the minds of experts from time memorial, and it is my opinion that it should never go, in the first instance, to a lay jury. I do not believe that such a jury, even with instruction from the Court, or from expert testimony, is capable of thoroughly understanding, or completely drawing the distinction between sanity and insanity, and it is my impression that all such questions should go before a jury of reputable experts on that subject. We appreciate the fact that men's minds are governed, and to a certain extent, controlled, by their prejudices, or their peculiar crotchets; still, men who have given the subject the careful thought and the deep research, which only an expert can give it, are alone capable of expressing a comprehensive and a satisfactory opinion upon it.

Now where insanity commences or where sanity ends, is a very, very difficult problem to solve, and there are many, as we know, who assert, that no man is thoroughly sane. At the same time, when there is a trial for murder, in which a human being's life is in the hands of men, who cannot thoroughly appreciate the position in which the prisoner was, when the act was committed, that circumstance is so grave and so terrible in its import, that it should indeed give us and the legislature, reason to pause and determine, who shall decide whether a man was sane or insane, when he committed a crime.

In regard to the insanity plea, it is entirely too much derided. People think that, because through a few technicalities, certain criminals have escaped on a plea of insanity, that, therefore, every man who pleads it, pleads it merely as a technical defence, without any merits, and we have that prevailing opinion throughout our community, I believe.

Insanity, as a defence, to use a vulgar expression, is "*played out.*" Everybody wants to get off on the ground that he is insane. Well, when a man pleads insanity it may justly be said, that with the ordinary lay jury the chances are that they may consider the plea "*played out,*" and, in my opinion, it is because they do not understand the subject, that they arrive at that conclusion.

It is the most delicate point that a man can contemplate, that of being on

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the border land between sanity and insanity, and the public prejudice against the plea of insanity is so great, that there is some risk of conviction through prejudice, simply because the plea is put in, and not from any thorough conviction in the minds of the jury that the man was not insane.

Public clamor—which was referred to by our learned friend, who read the paper—is a mighty factor in securing convictions. Public clamor is something which at times is as difficult for a good man to get rid of the effect of, as of his religious belief. People become imbued with a thought and cannot get rid of it, do what they will. That prejudice clings to them, rendering it very difficult to get an impartial verdict. The old rule of law that those who dwell in the vicinage, are the best judges of the facts, may do for ordinary cases, but when life or death is involved, or the pulling down to shame and degradation a man who has stood on a high pedestal of virtue and honor, then I say, the people in the vicinage are not always the proper people to try his case.

Dr. CARNOCHAN.—I believe with our friend opposite me, that insanity is very often pre-existing in the parties connected with crime. The brain is undoubtedly an organ of many virtues and vices, and one or more of the organs may be so disordered by irritation of various kinds, physical or mental, that the control is lost, and the healthy functions really are in abeyance or obedience to the morbid functions.

THE PRESIDENT (Mr. Clark Bell).—We should be glad to hear you upon the question, whether there is a tendency to insanity at the climacteric period in woman.

Mr. CHAMBERLAIN.—And whether or not that may be aggravated by surrounding misusage or abuse.

Mr. KIMBALL.—And what proportion of women become insane at that period?

Dr. CARNOCHAN.—There are certain organs brought into activity at the commencement of that change—the emotional.

The full action of insanity becomes developed, and is manifested by some act, that draws attention to it, that is not the *mens sano*. We are all living in an unnatural condition, more or less, the female is often liable to very peculiar conduct, at that period, and also sometimes running into crime.

Mr. KIMBALL —May that not be so also at the menstrual periods?

Dr. CARNOCHAN.—Not likely in a healthy woman.

Mr. KIMBALL.—But at the change of life you think differently?

Dr. CARNOCHAN.—Yes, because certain organs of the brain may become so sympathetic, with the peculiar change which is going on, that under certain circumstances, the vicious organs may become excited and insanity demonstrated by the vicious action. I am very sorry I came too late this evening to hear the learned discussion.

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Dr. AMELIA WRIGHT.—I certainly cannot subscribe to what has been said in regard to women at the climacteric period. It is impossible that all women are insane at that time.

Dr. CARNOCHAN.—Not every woman. I was misunderstood in saying that. They are more or less predisposed.

Dr. AMELIA WRIGHT.—I hardly think so, universally.

Dr. CARNOCHAN.—The menopause is more or less a natural action and in the course of nature, and not so perturbed in all instances as to create insanity, but there is a predisposition at that period of life, and during this predisposition through domestic trouble, physical abuse, etc., certain or gans of the brain may lose their balance.

Dr. AMELIA WRIGHT.—A woman at that period may be more likely to become insane, than at any other time, but that is all.

President Bell asks Vice-President Dr. Carnochan to take the chair.

Mr. CLARK BELL.—Mr. Chairman: The topic is one of great interest to the people of the State and certainly must interest this society. It is a matter of regret to me that we do not know the facts of this case as detailed before that jury. All the newspaper accounts vary, to such an extent, that it is impossible to know what the facts were. Upon that subject the Governor is better informed, than the general public. Certain of the public newspapers have undertaken to investigate this subject, some of our city press especially, and their accounts vary to such an extent, as to render it impossible for an unbiased mind, to come to a definite conclusion.

In regard to the Governor, it is perfectly safe to say, that he is an entirely just and conscientious man; I have known him from his boyhood, and I am sure that he is certainly not biased, or prejudiced against the accused, and he is a man as little influenced by public clamor as any person who has lately been in that chair, in this State. I quite agree with what ourbrother Bach and others say, in regard to the influence of public clamor, and that it affects the judiciary improperly as well as it does the bar.

If the author of the paper means, in speaking of the uncertainty of the verdicts in criminal cases by the term "fallacy in judicial proceedings" to go to the extent that he would do away with judicial proceedings in crimes; that is a species of iconoclasm to which I am not willing to consent. Our present method, has come to us through centuries of practice, we have been taught to respect it, and until something better is offered we must accept it. I am inclined to think that my brother Kimball, and perhaps myself, may have misunderstood, the thought and tenor of the author of the paper in his remarks, in regard to that.

What I understand the reader to mean is, that he considers, that the Governor and the public, should understand that what has been sometimes called "*the glorious uncertainty of the law*" should be a consideration, in so momentous a question as human life.

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Now in regard to the insanity of the accused, I will say, that in my experience and reading, I have never known a case of murder, accompanied by atrocities, or most extraordinary abnormal exhibitions, that did not indicate an abnormal condition of the mind, and I think those who have given this subject study, believe that these extraordinary and horrible atrocities in homicides, almost always indicate departure, from what has been considered the usual or normal mental condition.

In regard to the meno-pause in women, I think most writers are of the opinion, that at that period, women are predisposed to that form of insanity which is pre-induced by disturbance of the organs of sex, more than at other periods, and there are many instances where during that period, insanity has been exhibited and shown.

In regard to the action of the Governor, we have a right to say that our Governor will in this very case, or in any case, order an examination of the mental condition of any accused person, when any doubt exists, because he has done so in a very recent case, and the Governor who preceded him did so—President Cleveland.

My learned friend cited the contents of a letter which the present Governor wrote me April 7, 1885, upon the subject, in which he sends me copies of the action of Governor Cleveland in the case of William Henry Ostrander, and the present Governor was kind enough to enclose to me the report of the examining physicians and the law which regulates and governs such cases, and cited Sections of the laws of 1871, at pp. 658 and 652.

The subject is one of great interest, and one which I am very glad to see has received the attention which it has, not only among the friends of the reader of the paper, but at the hands of the Society.

Mr. Daniel R. Lyddy.—There is one point in the paper which seems to imply that the exercise of clemency by the Executive should be an individual and arbitrary act on his part, and not one subject to well defined rules and well defined reasons for its exercise. Being a power vested in the Executive, it corresponds to the veto power, though subject to rules, and I should have been very much gratified, if he had in his paper indicated these rules, and I hope he will indicate them in his rejoinder.

It must be shown that the case comes within the rules that govern these results, or that it has violated these results, or that such results do not exist, which I do not believe.

Mrs. Eugenia M. Berry.—I don't know as I ought to say anything, as I am neither a doctor nor a lawyer, but I have had a good deal of experience with the insane, and my opinion was formed several years ago that criminals—great criminals—who have until that time sustained good moral characters, who are tender by nature, and come to be so changed that they can commit these atrocious crimes are almost all of them insane. I think you will find that true, if you investigate the matter as I have, with an ac-

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quaintance and experience which includes a district of several hundred miles in area.

Mr. E. W. CHAMBERLAIN.—Perhaps it is my misfortune that I am one of those plain, direct individuals who do not always take into consideration, as is sometimes best, matters of policy and expediency. I should have had my attention called, by a perusal of these papers which your President has kindly given me, to the fact that perhaps there may be some little delicate emulation between these two professions, which are brought here together in this fri endly intercourse, as to which shall uphold and maintain the highest dignity, and serve the best purpose, and so, perhaps, I have gone into this business a little too roughshod, and have not armed myself sufficiently with policy.

I certainly desire to maintain the dignity of my profession. I love my profession. Its work is pleasant to me. I do not believe the dignity of my profession nor of any other profession, can be subserved or maintained by any other course than by truth and directness, and I think it is better not to assume a false dignity, but to take things exactly as we find them, and deal with them as we must ultimately.

The papers narrate an occurrence which took place in the Supreme Court of the United States, in which my learned friend, Gen. Butler, figured, and they say he was sitting there chewing the end of an unlighted cigar, and one of the attendants told him very peremptorily that he must not do that. It was not long ago that a very learned gentleman from the West went there to argue an important case and his clothing was not *de rigeur*. He didn't have any collar on, and that shocked those gentlemen mightily.

Now, I want to say that I do not think, that it is consistent with the dignity of our profession, to proceed on any such grounds at all. The dignity of the Supreme Court of the United States, can only be maintained by the administration of justice correctly and impartially, and it is not in any sense important whether gentlemen go there with collars on or not.

I want to say further that I have no such respect for authority as leads me to overlook a wrong and to cover it up, and I have seen constantly in the course of my experience matters, that I want, very much to correct—matters that I think it is important should be corrected.

This manner of proceeding in cases of insanity, it is very important should be corrected. We don't know at what time some friend of ours whom we love truly, may be brought into just such a situation as this unfortunate woman, of whom we have been talking to-night, and do just such a deed as she has done, and if done without moral accountability, we want some protection for that friend.

There is a series of trials going on here in New York, and some of the proceedings in those trials, are very extraordinary and such as to shake con-

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fidence in the administration of justice. Under the strong pressure of pub lic clamor, things have been done by public officials that never ought to have been done. The intimidation of the jury by bringing men into Court, to go through a show of signing a paper, directly for the purpose of intimidating one member of that jury, and then having a consultation over this paper by the Judge and the District Attorney, and even going so far as to make threats.

I do not want to see such justice in this country. I have seen too much of it, and I want to devote myself—if I can do anything—to bringing about a very much better state of affairs than that.

Public clamor is so powerful, so strong, and the proceedings of certain courts have conceded so much to it, and have been so very unfair, that now one of those men in that series, who is about to be brought to the bar of justice very soon, is seriously contemplating whether he will not go into Court and say, "I am not guilty, but I will make no defence before this Court."

I look upon such a situation as a very serious one. As a lover of my country I cannot do otherwise. I think this trial in the case of Mrs. Druse is of the same nature. I want to see an improvement. I want to see more reliable justice. I want to see justice which is not open to such strong criticism.

As for the Governor, while it makes no difference personally, I have no particular respect for his authority. He has a business to do, a duty to perform, and that, when well done, is all we can expect of him; but we do expect that that shall be well done, and as we are supposed to be living in a country where speech and thought are entirely free it is not improper to criticise the actions of the Governor, particularly in cases of such moment as this.

I do not care to enter into a very lengthy criticism. In fact, I do not know that I can add very much to the interest of what has been said; but, to summarize my ideas, if I have not correctly expressed them before, here is a woman at the time of life when there is shown a predisposition to insanity. She has gone through an experience which might of itself induce insanity—which is quite sufficient to induce insanity. At the particular moment when this insane act is done, or when what may perhaps be insanity manifests itself, she receives treatment of very great aggravation. She is placed under circumstances which must necessarily stimulate the utmost activity of an unhealthy mind, if her mind is unhealthy, and all those influences combined together make it so exceeding probable that this woman is insane, that the omission to make an inquiry into it up to this time is really culpable, and that culpability attaches to everybody who has had connection with the case, whether it

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be the Judge or the Governor, or the counsel, or the jury. I say with all the respect to which those people are entitled, but I still say it.

Now, my idea of the pardoning power is that for the merciful purpose of correcting the faults of justice, the pardoning power should be the same here as it is understood to be on the other side of the water, a country from which we have derived many of our laws and institutions, and that is that the power is absolute. I am entirely opposed to a Court of Pardons, which is but a continuation of proceedings had in Appellate Courts, and there is nothing in this record to make the Appellate Courts change the disposition of the case. There is nothing that the Appellate Courts could have taken hold of to reverse the case. It was presented properly to the Appellate Courts, and upon the record and upon the matter that the Appellate Courts have before them they were perfectly justified in forming this judgment.

Now, in the matter of pardon, when it comes to the last resort and there is an interest for granting it, I think that the power should not be hampered by any rules whatever, and the Governor of the State should be allowed to pardon for any reasons he chooses.

I am not a believer in punishment as such, but I am a believer in the efficacy of correctional treatment for criminals, and I go so far in that direction, that I do not believe any punishment should ever be inflicted, merely as punishment and without any view to correction, and so I would very much extend the pardoning power, putting it, of course, into the hands of a discreet man, such as it is fair to assume the Governor of the State is, and letting him couple with his discretion such conditions as he may think, fits each individual case.

I say that that pardoning power ought to be exercised very generally, so as to enroll almost every convict that finds his way into prison under that system. I believe that criminality could be very much lessened by such a course as that. I think it is a right view to take, and it is a view that a great many do take.

But now the hour is late and I must hasten away. I have several notes here, but I have been pulled down and raised up again, by the gentlemen who eloquently discussed this paper, so that I think you have got all before you that I might add.

Dr. MILNE.—I would like to ask on what grounds this gentleman believes this woman to be insane.

Mr. CHAMBERLAIN.—I have stated that there is a strong probability that she may be found to be insane. Her time of life, the twenty years of outrage that she has sustained and the specific outrage at the time of the murder which precipitated this whole twenty years, of outrage into one moment.

Dr. MILNE.—There are physicians here who say, that unless a woman is

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predisposed to insanity, there is not one in ten thousand who become insane at that period.

Mr. CHAMBERLAIN.—That may be true, but I think Dr. Carnochan spoke of this period as predisposing woman to such an attack; and do you not think, or rather do you think, as a medical man, that a person can sustain all that wear and tear and strain of the nervous system, that that woman must have gone through, during these twenty years of outrage, without being to a certain extent predisposed and very liable, to such influences as she may have been under at the time of the murder ?

Dr. MILNE.—It seems to me that if this woman had been insane at the time she committed this crime, there would still exist in her condition some characteristics, to indicate that there were symytoms of insanity in her. I should suppose that something during her trial, would have indicated that the woman was insane at that time, or that she would have shown signs of insanity since.

Mr. CHAMBERLAIN.—I doubt if a committee making the investigation could positively say, whether the woman was or was not insane at the time of the commission of the act.

APRIL SESSION, 1887.—A regular meeting of the Medico-Legal Society was held April 13th, 1887, at the HOTEL BUCKINGHAM, The President Clark Bell, Esq., in the Chair.

The minutes of the March, 1887, meeting were read and approved as read. The following gentlemen proposed by President Clark Bell were on the recommendation of the Executive Committee duly elected active and corresponding members respectively—

Active Members.

EDWARD J. COWLES, M. D., Superintendent McLean Asylum, Somersville, Mass.

LOUIS LIVINGSTON SEAMAN, M. D., New York City, was proposed by Dr. S. N. Leo, seconded by Mr. Clark Bell and duly elected an active member.

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Corresponding Members.

J. G. PINKHAM, M. D. and

P. O. HOOPER, M. D., Supt. Arkansas State Asylum were proposed by Mr. Clark Bell and duly elected corresponding members.

A notice announcing the death of Prof. Jean Theophile Gallard, M. D. Corresponding Member of this body and Secretary of the Medico-Legal Society of France, received by President Clark Bell from the family of the deceased Professor, was read and duly ordered on file. Mr. Bell made remarks in eulogy of the deceased, and of his career as a Physician and Scientist.

Dr. Louis Livingston Seaman read the paper of the evening entitled—"PRISON LABOR AND PUBLIC UTILITY." Discussion was participated in by: Drs. Matthews, Leo, Seaman, and President Bell.

A letter from Mrs. C. E. Van Cortlandt, daughter of the late T. Romeyn Beck, M. D. acknowledging the receipt of Medico-Legal Papers Series No. 3 from Mr. Clark Bell, was read and ordered on file.

There being no further business before the Society on motion, the meeting adjourned.

ALBERT BACH.
Secretary.

DISCUSSION OF DR. SEAMAN'S PAPER.

Dr. Matthews:—Dr. Seaman's paper may seem visionary in some respects. The real point of the paper is to utilize the system of Convict labor. It seems to me that

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it might lead to escapes, and it would take more men to look after them than their labor would be worth. It is a good idea to make them work as much as possible. The paper has good ideas in it. I am not prepared to discuss it as I have not thought about it; but I am entirely in favor of it.

Clark Bell:—Dr. Seaman, what would be your plan, supposing for example, this City desired to build a series of public docks at North River, which they need very badly? A short time ago I had occasion to walk near the Battery, where a wall of stone had been constructed, which was miserably done, as I noticed that it was upheaving, and falling to pieces already. How would you practically propose to use the present population of the prisons, on that work?

Dr. Seaman:—The present prison population is now moved from place to place. They could be taken from the dock, to whatever place they were to work at, and they could be transported in boats, as they are now from Blackwell's to Governor's Island, and easily enough guarded. The gang might just as well be working as eating the bread of the public, and they could be taken directly from the Island and back again in boats.

Pres. Clark Bell:—There is no trouble about conveying these Convicts. Under the French system the prisoners condemned to the galleys, were required to work out their terms, and you all remember in the earlier sentences of prisoners they were condemned to hard labor. That was part of the sentence and the theory of labor for prisoners

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has been growing into our system and recommending itself to all English speaking communities.

Dr. Seaman:—Provision should be made for them. That is practically the use the *New York Herald* is advocating for prison population to be put to.

Pres. Bell:—Superintendents of Insane Asylums and of prisons and the Humane Societies, are strongly favoring manual labor for their inmates—mainly of an agricultural nature, and those who are capable of doing mechanical work, should be given such work to do. They could engage in agricultural operations with similar good. The theory of the prisoner owing labor to the State, as a part of his punishment, is of doubtful justice. Prison labor as a measure of public utility, is quite practicable. Dr. Seaman, the Author of the paper takes the ground that he was in favor of having convicts in this country do that part of the public work which is for the public good. The public supply of water for instance, and that the prison and convict labor, should be used for that purpose. They should do that work.

They do not bring a revenue to the State at present, and they cost the State a great deal of money. Of the public work that is being done on the Island at present—for instance if they have to repair the Docks, instead of utilizing that labor, the public department is called upon to do the work, at public expense which should be done by the convicts for nothing.

Dr. Leo did not hear the paper as he came in late, and spoke by consent on SEWAGE.

Dr. Leo:—I think "Sewage" is a very important sub-

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ject. When I was visiting the City of London I went where they dispose of the city refuse. They attach more importance to it there, than here. At a meeting in London a gentleman read a paper, in which he estimated that the value of the Sewage in the City of New York was worth a great many millions per annum. The trouble in this City, is that more money is to be made by preventing the Sewage of the City than in the proper use of it.

The Sewage here is allowed to filter through the same places it used to.

When I was in the City Health Department there was a company formed to ascertain the cost of removing garbage and using it as a manure, which it guaranteed to do. We all know that a very large sum could be saved in that way, thus doing away with ash barrels, and all that kind of thing.

Some sort of Sewage is used for fertilizers. Many of us have seen the carts carrying the manure away from the railway stables. In fact one of the problems of the age often discussed is, what to do with garbage and ashes. I take up the morning paper, I read of the efforts of the Health Department to do away with it. I am afraid that our municipal government has not reached that state, that authorities are able to do the best they can for the people of the city.

We spend enormous sums in cleaning the streets, and emptying ash barrels, and the same routine goes on year after year with the same results.

I believe, if the Sewage, the garbage, and the ashes of

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the City of New York were properly utilized, they would yield a revenue of millions to the Treasury. If you inquire into the last reports of the municipality of the City of London, you would find that their revenue was enormous from this source. I am not prepared to state how many hundreds of thousands of pounds it reached at that time, but it was a very large figure.

I remember observing in Paris at half-past five o'clock in the morning a number of women sweeping the streets and men carrying away the dirt to use as manure for grounds outside the City.

This subject is one of great importance to the citizen and taxpayer, and I do not know of any subject better suited for a Society of this kind to agitate, than this of Garbage and Sewage.

Fortunately we live in the great city of the United States, we have a reform Mayor, a reform Department, and I hope they do not limit it. The value of Sewage should be properly estimated and made a fertile revenue to this city.

In the absence of PROF. J. J. ELWELL, of Cleveland, Mr. Clark Bell read his paper on—CLASSIFICATION OF MENTAL DISEASES, which had previously been read by title.

The following discussion ensued:

Dr. Peet.—If you wish a nomenclature it is better to take a language that all are familiar with, and I suppose that was the idea in adopting the Latin language, which learned men of different countries could understand.

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Dr. Seaman.—I would like to know to what school Prof. Elwell belongs.

Prest. Bell.—I do not know what college gave him his degree of M.D. He is better known as a lawyer than a physician. He is more a jurist than a medical man. In the law we have had this struggle, we have had law Latin and law French and Latin forms phrases. We are now rid of all that. I quite agree with him in regard to writing prescriptions in the language of the country.

In this country it was wise to throw away Latin in our legal forms; in Germany they have done away with them. We are coming to the doctrine of codes, written in the plain language of the land like the Code, Napoleon and the people understand these written codes. The people want them, the press wants them, public opinion is in favor of them, but there are some conservative men, and lawyers, that cling to the old way.

As science advances we do not need Latin, and the language of the country is taking its place. In every science this is now true, in England, France, Germany, Italy and America, each savant now writes in his native tongue. We can recall the time when scientific works were mainly written in French, that was the polite language of the world, the language of Court diplomacy. That day has passed, none but Frenchmen think so any longer. English is spoken at Washington and London, German in Berlin, French in Paris.

Dr. Seaman.—Would Prof. Elwell have English in Botany, or is he going to have any certain Code for the world? I do not see how it is possible in any true

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scientific sense to have anything but Latin—it being the basis of all languages.

Dr. G. Grant.—It is very important to have one kind of language, especially in the matter of Botany. The scientific language of Botany, by the consent of all the world is fixed in Latin.

Prest. Clark Bell.—I think prescriptions ought to be written in English. There are dispensary druggists, and educated clerks who do not understand Latin well. If they were dispensed by physicians it would be all right. If you want medicines that are prescribed for in Latin, and you go to a clerk, he may make a mistake, and how many are made. If it was written in English he would not be so liable to make a mistake. I think that the law ought to require the physician to make his own prescription, or else write it in plain English or in the language of the country where the prescription is made.

I do not know how they can expect a common druggist's clerk not to make a mistake. We would be at a loss here among educated men, if we were given a prescription—to read it—although we know something of Latin. I have heard that many physicians could not read their own prescriptions, much less put them up.

Dr. Seaman.—I have known some literary men in the same predicament. Horace Greeley said he had three kinds of writing, one that he could read himself, one that the compositor could read and one that he'd be ——— if any one could read.

Dr. Matthews.—They have a United States Dispensary in every drug store, which they ought to consult.

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Prest Clark Bell.—You go into a drug store and present a prescription written in Latin. Suppose you are giving morphine and the druggist's clerk makes a mistake, there is a serious result, you write certain marks or signs and they signify different quantities. It is very dangerous, these symbols and Latin words disguising powerful remedies or poisons. The French system starts from the decimal point. Frequently the slightest mistake in either may lead to the death of all who take it, still it is being commonly used every day in the week in drug shops all over the City, with remedies even that will cause death, if mistakes are made.

MAY 10th, 1887.—MEETING was held at BUCKINGHAM HOTEL, President Clark Bell in the Chair. The minutes of the April meeting, 1887, were read by the Secretary and approved. The following gentlemen were recommended by the Executive Committee for election :—

Proposed by President Bell as active members : Judge A. J. Dittenhoefer, of N. Y.; Col. Edward C. James, of N. Y.; Wm. C. Burke, Jr., M. D., of South Norwalk, Conn.

Proposed by Albert Bach, Esq., as active members : David Tomlinson, Esq., 140 Nassau street; John S. Lindsay, Esq., 140 Nassau street.

Proposed by Mr. Simon Sterne : Hon. Oscar Strauss, our U. S. Minister to Turkey, Constantinople, Turkey.

Proposed by Dr. Peet as active member, Dr. George S. Knickerbocker, Station L., N. Y. City.

Corresponding Member.

Walter Channing, M. D., Brookline, Mass.

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On balloting, the gentlemen proposed were duly elected.

The Chairman of the Executive Committee reported as its unanimous action, taken at a recent Banquet tendered the Committee by Mr. Simon Sterne, a recommendation that the Society offer a first prize for the best essay upon a Medico-Legal Subject, of one hundred dollars and of fifty dollars as a second prize, to be awarded by a Committee to be named by the President of the Society, and limited to persons who are members of the Society at the time the award of the Committee is made. The details to be fixed by the Committee, and that the fund for the prize be raised by subscription which had been signed for ten dollars each by nine members of the Executive Committee, and which would be open to members of the Society who desired to contribute for the purpose.

On motion of Mr. Ellinger, the recommendation of the Executive Committee was unanimously approved and the Executive Committee empowered and directed to carry the same into effect.

Louis C. Whiton, Esq., of the New York Bar, the Counsel of the Citizens Life Insurance Company was then introduced by the President, who read a paper entitled—"The Penal Aspects of Suicide." It was discussed by Dr. S. N. Leo, Dr. Gabriel Grant, Mr. Albert Bach, Mr. Morris Ellinger and President Bell. Mr. Whiton closed the debate.

The reading of the paper announced by Mr. R. S. Guernsey for this evening, was, on account of the lateness

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of the hour, postponed on his suggestion until the June Session. Mr. Bell announced the receipt from the MEDICO-LEGAL SOCIETY OF FRANCE, of Tome IX. of its BULLETIN published in 1887, containing the record of its transactions from the session of Jan. 12, 1885, to that of Dec. 13, 1886, being complete for the years 1885 and 1886, with the original papers read before that body, a volume of four hundred and twenty-seven pages.

It was unanimously Resolved: That this volume be referred to the President, Mr. Clark Bell, Dr. S. N. Leo and Mr. Morris Ellinger for examination and report to the Society. ALBERT BACH, *Secretary.*

The Society adjourned.

☞ NOTICE.—Subscribers, members or others desiring to cross the Atlantic by ocean steamship, will be able to secure extra cheap rates by addressing the editor of this JOURNAL.

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JOURNALS AND BOOKS.

COCOAINE IN OPHTHALMIC AND GENERAL SURGERY. By H. KNAPP, M.D. G. P. Putnam's Sons, 1885.

Cocoaine and its use may be said to have become somewhat epidemic among physicians in general practice as well as surgeons and specialists. It has been almost the rage. Dr. Knapp translates the able paper, giving his experiments upon the eye (read before the Medical Society of Vienna) as the *basis* or *piece de resistance* of his *brochure*, to which he adds the American contributions of Noyes, Agnew, Moore, Miner, Roosa and himself, besides Mittendorf, Bosworth, Holt, A. H. Smith, Powell and a score of others.

He quotes from Meyer, Ad Weber, Vulpian, Konigston and seven or eight European writers of celebrity, and concludes by general observations upon the drug in its pharmacological, physiological, and therapeutical action.

THE OPIUM HABIT. By ASA P. MEYLERT, M.D. 4th edition, 1885.

OPIUM ADDICTION. By J. B. MATTISON, M.D. 1885. G. P. Putnam's Sons, New York.

Two *brochures* on a subject on which too little light has been thrown. The opium habit is not waning; it seems to us to be increasing. The medical profession, in the majority of cases, use the hypodermic injection, which they have taught their patients, can be used with impunity and perfect safety for even headaches, or minor ills, till the evil is done, and the vice created.

Would it not be well for some courageous physician to speak the truth about the vice, and its usual cause, and arrest the awful consequences witnessed by those who are familiar with, or addicted to the opium habit,

FUNCTIONS OF THE BRAIN. By DAVID FERRIER. G. P. Putnam's Sons. 2d edition, 1886.

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Dr. Ferrier announced, when this work appeared, that his object was to give the profession the, result of his experiments as to brain function. He widens this in the second edition, by rewriting much of the book, to embrace, in addition, what he regards as the best established facts, in recent physiological and pathological research, without, however, making any changes in his previously expressed opinions, regarding cerebral localization.

The work is divided into thirteen chapters. The first devoted to the structure of the cerebro-spinal centers, and the succeeding six upon the functions separately, of the spinal cord, the medulla obloganta, the menaphalon, and cerebellum general, the optic lobes, the cerebellum and the cerebrum.

Chapters 8, 9, 10 and 12 are devoted to the cerebral hemispheres. A chapter on each of the following themes: electrical irritation, considered physiologically; one as to sensory centers; one to motor centres, and the twelfth considered physiologically.

The eleventh chapter is devoted to the functions of the basal ganglia, and the work closes with the thirteenth chapter, on cerebral and cranio-cerebral topography.

There are 137 illustrations, and the publishers have done their share of the work very well.

However observers may difier or concur with Dr. Ferrier, upon the theories and deductions he has so ably drawn, from the wonderful experiments on which he has based his own conclusions, there will not be two opinions among scientific men, as to the value and real lessons of his labors, nor of the admirable treatment made by this author of his topics.

Dr. Ferrier quotes, and does fair justice to the labors of his cotemporaries, notably of Fritz, Hitzig, Dalton, Weir, Mitchell, Luciani, Hughlings, Jackson, Nothnagel, Bastian and others, but these do not change him, in the conclusions he reaches, and his work is convincing, able, and to the last degree, scientifically fair.

Withal that charm of interest, that Luys throws over the general subject in his work, few who study them both will hesitate to give a decided preference to the English physician over the French observer, so far as their works go. To the physician, alienist or student of the brain or mind we, can say with emphasis that Dr. Ferrier's book should be read with careful thought and diligent study.

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THE STORY OF METLAKAHTLA.

Mr. Henry S. Welcome recites in this interesting book, the wonderful work wrought by Mr. William Duncan in, civilizing the Indians from cannibalism, in British Columbia, and the still more wonderful, not to say scandalous, manner, that these Indians and Mr. Duncan, have been treated by the English Church authorities, and the Canadian government,

In a word, these Indians, numbering 1,000, have been robbed of their land, their churches, school-houses and dwellings, and are now seeking refuge from the Government of the United States in our newly acquired country, Alaska.

The Pilgrims, who landed at Plymouth in 1620, had no graver or more just cause of complaint, than have these Christian Indians, educated in all kinds of handiwork; and it is to be hoped our goverment, and the American Congress, and people, will furnish them with new homes in Alaska, and that we shall see planted on American soil, the nucleus of a movement in civilization, for the thirty odd thousand nomadic Indians, of the great far North-west, which will be felt through coming time.

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Books, Journals & Pamphlets Received.

J. A. WRIGHT, M. D., Sup't, Toledo, Ohio.—15th Annual Report of W. O. Hospital for Insane (1886). Simulated Insanity, Report from Cincinnati Sanit. Critic (1886).

G. P. PUTNAM'S SONS.—Functions of the Brain, by David Ferrier, M.D., LL.D., F.R.S. (1886). Opium Addiction, by J. B. Mattison, M.D. (1885). The Opium Habit, by Asa P. Meylert, M.D., 4th ed. Brain Rest, by J. Leonard Cowing, 2d ed. (1885). Cocaine, by H. Knapp, M.D. Reprint, 1885, with contributions by Drs. F. H. Bosworth, R. J. Hall, E. L. Keyes and Wm. M. Polk.

R. S. SUTTON, M.D.—Annual Presidential Address before American Academy of Medicine, Oct. 12, 1886.

AUGUSTIN M. FERNANDEZ, M.D.—Diagnosis of Yellow Fever (1887).

JAMES B. HUNTER, M.D.—Persistent Pain after Abdominal Section (1886).

EPHRAIM CUTTER, M.D.—Baked Beans (1887). Feeding Patients against the Appetite (1887).

A. WOOD RENTON, M.A., LL.B.—(T. & T. Clark, Edinburgh, 1886). Menomanie Sans. delere. Irresistible Criminal Impulse.

ROSWELL PARCH, M.D.—Medical Press of Western New York,

SANGER BROWN, M.D.—Construction and Organization of Hospitals for Insane.

W. J. BLAND, M.D.—Report of State Hospital for Insane Western West Virginia for 1885 and 1886.

FREDERICK PETERSON, M.D.—The Epileptic Colony at Bielefield.

ALVIN A. HUBBELL, M.D.—Congenital Occlusion of Posterior Nares.

RALPH L. PARSONS, M.D.—Nomenclature in Psychiatry.

PROF. STANFORD E. CHAILLE.—The Abuse of Alcholics.

B. WESTERMAN & Co.—Bultltuin Mensuelle (C. Renwald).

AUGUSTUS V. PARK, M.D.—Pyelilis, caused by Renal Calculus.

H. R. STOVER, M. D.—Ante-Pasteur Hæmorrhage. Medals, Jetons and Tokens. Illustration of Obstetrics and Gynaeology.

BLAKISTON, SON & Co.—Announces New Series of Manuals, 1887.

JAMES HENDRIE LLOYD, M.D.—Moral Insanity in its Medico-Legal Aspects.

DR. NORMAN KERR.—Proceedings of Society for Study and Cure of Inebriety, May, 1887.

S. E. JOSEPH, M.D.—2d Report Oregon State Asylum. 1885, 1886.

PROF. DR. MIERZEJEWSKI.—Mental Diseases and their Treatment. One

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copy in the Russian tongue. St. Petersburgh, 1887. One copy in the Polish tongue. Krakow, 1887.

T. D. CROTHERS, M.D.—Inebriety and Inebriate Hospitals in America. Mental Responsibility in Inebriety.

HENRY S. WELCOME.—The Story of Metlakahtla.

PROF. WILLE.—Bericht über die Irrenaustall Basle, 1886. Basle, February 24, 1887.

PROF. GVOZDEV—Of the Royal Medical University at Kezen, Russia. Post Mortem Indications. Wounds, Bruises and Contusions. Newly Born Children.

JOSEPHINE SHAW LOWELL—Report as Member of State Board Charities to Legislature of N. Y. as to N. Y. City Institution for children.

DR. JAMES KNIGHT—23rd. Annual Report N. Y. Society for Ruptured and Crippled (1886.)

B. F. UNDERWOOD.—Nos. 1 and 3. of the Open Court, Chicago.

J. EDWIN COONEY, L. R. C. P.—Inaugural Address of SIR JOSEPH FAYER to Society of Medical men qualified in Sanitary Science.

D. R. LONG, M. D.—Report Mich. Asylum for Insane Criminals, 1886.

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THE MAGAZINES.

ATLANTIC.—Dr. Oliver Wendell Holmes, One Hundred Days in Europe, and Two American Memoirs are interesting in July number.

SCRIBNER'S—Has made a decided hit with its Thackeray letters.

THE THEATRE—Has changed to a monthly during summer vacation.

THE ECLECTIC.—Its selections are admirable.

PHRENOLOGICAL JOURNAL.—Thoughtfully edited.

LIPPINCOTT—Is making a healthy growth.

FRANK LESLIE'S MONTHLY.—A splendid family magazine.

GODEY'S LADY BOOK.—The ladies like it.

GRIP.—Mr. Benough is making this journal a wonderful success in Canada.

PUCK—Hits hard and cuts close on existing abuses.

THE AMERICAN—We have not received since it changed from Brooklyn Magazine.

NEW PRINCETON REVIEW—Has frequent articles of interest to scientific readers.

THE CENTURY—Is contesting in England for supremacy with the old-established magazines.

ART AMATEUR.—Our readers who like art should see this journal.

LITTELL'S LIVING AGE—Is as good as ever.

THE FORUM—Is a very ably edited journal.

LIFE—Is the brightest and wittiest of the illustrated weeklies.

THE NEUROLOGICAL REVIEW.—The death of Dr. Jewell will doubtless end its career.

ALIENIST AND NEUROLOGIST—Maintains its old-time excellence.

JOURNAL OF MENTAL SCIENCE.—Dr. Sachs is doing good work on this ournal.

MIND IN NATURE.—Is decidedly interesting, beautifully printed and valuable.

THE NEW ENGLANDER YALE REVIEW.—Ably conducted, with superior corps of contributors.

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JOSEPH GUISLAIN.

By Jules Morel, M. D.

Hospice Guislain, Belgium.

Guislain was born in Ghent, the 2d of February, 1797, and began his medical studies, in the school of medicine of the department of the Schelde, and took his degree of physician in 1819.

From that time, commenced his first interest in the welfare of the insane, with whom he came first in contact in an asylum of the town. He witnessed the inhuman treatment inflicted upon these poor beings and his generous heart was moved. He decided to help these unfortunates and directed his studies to mental diseases. In 1827 his *Traite de Al'lienation Mentale et les Hospices des alienes* was published. In this work he depicts the sad position of these poor people and shows the moral and physical methods by which their health may be restored. This book was a success and Guislain was appointed chief physician of the Insane Asylums in Ghent. In 1835 he published his *Traite sur les Lois.* and from that moment he never doubted the possibility of the recovery of these people, till then abandoned and victims of the most revolting ignorance and carelessness. This work was quite a revelation, and had the honor of being

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translated into different languages. Guislain became with Pinel the liberator of the insane; all his life was then devoted to their cause.

Children have their St. Vincent de Paul and the deaf and dumb have their Abbe de l' Epee, but till that day nothing had been done for the Insane. In 1838 he published *un Expose de l' Etat des Alienes en Belgique*, in which he describes to us the patients kept in their families more numerous even than those who were in the Asylums. It was thought the patients did not feel heat or cold, nor the bad treatment inflicted upon them. These poor unfortunates were badly fed, left to themselves, in houses squalid beyond imagination.

Cheerless, forgotten by those whom once they loved, they generally died, for want of care. In the public institutions their situation was not better in any respect; they were locked up without the order of a physician; there was no protection for them at all.

It devolved upon Guislain to awaken the Government from this apathy, and a commission of ten members was intrusted with the duty of improving the condition of the insane. Guislain was the reporter, but in spite of all his activity, it was not till 1850 that the Parliament adopted a law, which spoke in favor of the insane. This improvement, however, did not prevent Guislain from continuing his philanthropic efforts. With the help of the criminal authorities he organized the asylums of Ghent, and in 1851 the commission of the civil hospitals built an asylum (modele), which is to-day world-renowned. The old prison is to-day a palace, the jail,

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locks, chains have disappeared and have made room for beautiful lawns, where green grass and flowers are found in abundance.

From that time a great many asylums were built. Guislain was Professor at the University of Ghent and lectured upon Philosophy and mental diseases. This last course was published in 1852, under the title *Lecons orales un les Phrenopathey.* This edition was soon exhausted and where it was sold it was necessary to pay a price higher than it had cost the book-seller. D. Yugeles published in 1871, a new edition with notes, prepared by Guislain himself for a later edition, augmented by a notice of the chief progress which the Science of mental medecine had since made. It is in this refined work that one can admire the noble intelligence, the sure judgment, the profound knowledge and the philanthropic heart of the writer.

He sacrificed all for the sake of the insane, he loved them, they constituted for him a family, to which he devoted his existence. A great many authors praised this great man, but it was left to a foreign physician, Dr. Brierre de Boismont, to put in a clear light the merits of this great scientific man and the noble qualities of the great philanthropist. His name, esteemed by all physicians, who pay attention to mental diseases round the world, was immortalized after his death, which occurred in 1860. The asylum for which he spent the best part of his life bears his name, and the commission of Ghent rendered thus a well-deserved homage to the reformer of asylums, and the liberator of the insane.

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More than that Guislain, extended his sphere of action to the development of mental diseases. He worked ardently to obtain a law against alcoholic excesses. In a word, he did not lose a moment in his life, he was a genuine thinker, but practical and of unequalled perseverance.

His last will was made in favor of the insane, he left for them and to the coming scion of the Hospitals in Ghent $10,000, besides his library and a collection of paintings, which is kept in the Hospital in Ghent. His marble bust, the work of Antoine Van Enaeme was offered to him by his old pupils, in homage of his great talent and his devotion. It is kept in the public library, in the University of Ghent.

He was the founder and the president of the Society of Medecine in Ghent, and to this Society he bequeathed also a sum of money, to help defray the expenses of lectures, and to institute a prize every five years. As a man, Guislain was sincere, of a noble character, dreaming only of good. He was simple, unassuming and very amiable. The day he was buried was a day of mourning for his entire native town, because one of its most worthy citizens was lost forever; a man whose only aim was to do good, who was in the habit of attacking abuses, but with great tact and strong arguments. As we have said already the memory of Guislain is not likely to be forgotten by a grateful nation.

The Belgian Physicians, in a meeting in 1882, in the hospital "Guislain" declared loudly that not enough had been done for the benefactor of humanity, and they

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decided to perpetuate his memory by erecting to him a statue. A public subscription was opened, the city and the provinces brought their contingent, but better still the physicians throughout the world felt it their duty to co-operate paying in this debt of gratitude.

There was a competition among different sculptors of the country, and it was to M. Hausburs de Schaerheekler, of Brussels that the great honor fell of reproducing the noble features of this illustrious son of Belgium. While I write these lines the statue of Guislain is an object of admiration to the public, who visit the Salon des *Beaux Arts*, in the birthplace of the immortal physician.

J. M.

NOTE BY THE EDITOR.

The gifted and lamented B. C. INGLES, in response to a request for the portrait of GUISLAIN, to be sent the editor of this Journal, remitted a fine copy of Dr. BURGGRAEVE'S work, entitled, "Etudes Medico-Psychologiques de JOSEPH GUISLAIN" (Th. Lesique, Brussels, 1867), which contains the portraits we reproduce in this number of the Journal. The first is a copy of the bust of Guislain, by A. Van Eenaeme, and the other was the design of a statue in his honor by the same artist.

Dr. Ingels engaged to write for the Journal the sketch that was to accompany these representations. His sad death prevented this work by him, but to whom could it be entrusted better than to his friend and colleague, Dr. JULES MOREL, then President of the Société of Mental Medicine of Belgium, the friend, admirer, compatriot and colleague of Guislain, and who has now been made Superintendent of the HOSPICE GUISLAIN, named in his honor.

The statue here given must not be confounded with the statue about to be erected to the memory of GUISLAIN. Dr. Morél has promised to send a

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copy of that work in future, but it has not been received in time for the current issue.

The name of GUISLAIN and his memory will remain immortal, and like those of PINEL, in France, CONNOLLY and the elder TUKE, of England, will stand as bright and lustrous lights, which will mark the changes they inaugurated early in our century, for the amelioration of the condition of the unfortunate insane confined in public and private asylums.

The translations of the sketch of GUISLAIN from the French, was made by MRS. Dr. S. N. LEO, to whom the thanks of the Journal are due.

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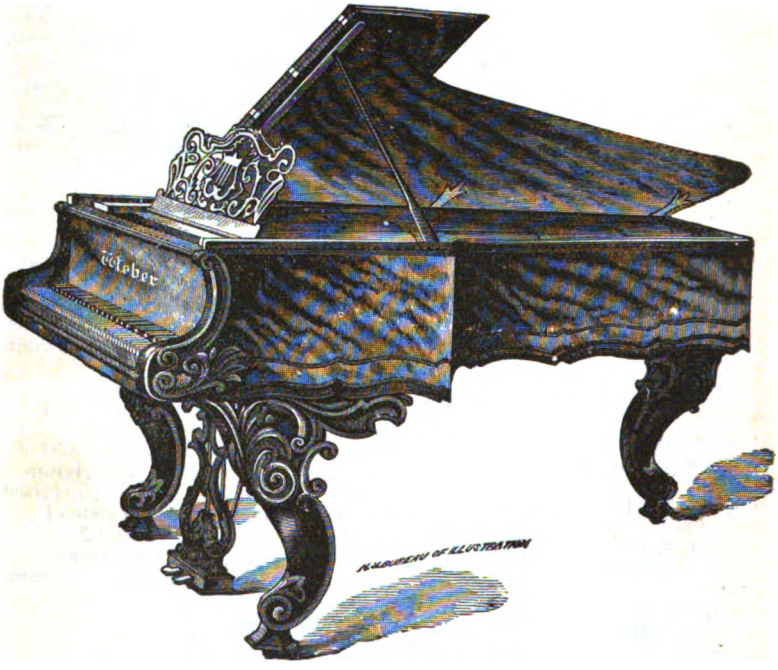

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Aaron J. Vanderpool

*THE RELATION OF INTEMPERANCE TO INSANITY.**

By Clark Bell, Esq.

Morel says:

"The principal causes of Insanity are: Intemperance and neglect of the laws of health." He believed that there are few of the unfavorable conditions of human life that by themselves cause more human degeneration than the excessive use of alcohol †

Dr. C. H. Hughes, the able editor of the *Alienist and Neurologist*, in speaking of the causes of Insanity, says:

"The families of intemperate parents furnish the recruiting ground for Insane Asylums."

These unfortunate children, if not idiots or epileptics, are liable to grow up with querulous, explosive tempers, with feeble powers of self-guidance, weak in temptation, unstable, self-indulgent, vicious and hysterical. ‡

Th. H. Kellogg, M. D., one of our most intelligent students of Insanity, with a valuable experience says:

"It is estimated that twenty-five per cent. of modern cases of Insanity are due to the direct or indirect effects of the abuse of alcoholic stimulants."

This assertion is made with reference to the immediate effect of alcohol on individuals that consume it; and if its remote, baneful influences through generations are to be taken into account, it would be necessary to add considerably to the numerical strength of the statement. §

The same authority, speaking of the Etiology of Insanity of this class or type, says:

"It is active first in exciting attacks to which there is already an heredi.

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* Read July 6, 1887, before the International and Colonial Congress of Inebriety, at London, England, and September 14, 1887, before the Medico-Legal Society of New York.

† (1) (des Degenere del espece Humaine.)

‡ (2) (*Alienist and Neurologist*, 1887.)

§ (3) (Reference Hand Book of the Medical Sciences. Wood & Co., 1887.)

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tary or an acquired tendency, secondly: in the developement *de novo* of characteristic types of mental derangement, and directly in the transmission of weak and irritable nervous systems, that predispose to mental disorder."

"The types of mental aberration caused directly are:

1. Gradual physical degeneration, that attains finally to the complete extinction of the moral powers.
2. Ordinary attacks of mania and melancholia.
3. Delirium tremens.
4. Alcoholic Dementia and
5. Dipsomania.

This latter form has a double origin and includes two very different classes of cases. In the one class it results from a susceptibility to alcohol that is most intense, and inherited from intemperate parents, so that on slight indulgence the patient every now and then loses all self-control, and goes through a reckless alcoholic debauch.

In the other class the dipsomaniac tendency is simply one of the morbid impulses that occur in periodical insanity, and it will be found on close observation that these cases present insane pecularities during the interim between their drinking bouts." *

LUNIER has probably furnished the most complete and reliable statistics, upon this subject, of the Modern Authors.

He claims that while the consumption of alcohol nearly doubled in France in the twenty years from 1849 to 1869, that the cases of Insanity from intemperance had risen from fifty-nine per cent. with men, and fifty-two per cent. with women. These statistics are remarkable as showing the relative increase in those districts of France where alcoholic or distilled spirits took the place of wine.

M. LUNIER claims distinctly that the number of suicides everywhere in France followed the increased consumption of alcohol. He also shows that in the north of France, where the consumption of alcohol had nearly doubled in twenty years (1849 to 1869) the cases of Insanity from alcohol had quadrupled among men, who consume it, without any corresponding increase among the women, who did not.

He also estimates that at least fifty per cent. of the idiots and imbeciles of the great cities were the children of notorious drunkards, and that the majority of children born of parents who were constitutionally drunkards are, as he considers, "weak in some way or other." †

THE EARL OF SHAFTESBURY, in his evidence before the select committee

* (3d) (*Ibid.*)

† (4) (Annales Medico Psychologique 1872).

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of the English Parliment, in 1859, expressed his opinion that fifty per cent. of the cases admitted to English Asylums were due to drink. ** (Evidence before Parliamentary Commission, 1859.)

While many have doubted the accuracy of this statement, it must not be lost sight of:

1. That no man in England had better, or half as good facilities of observation, or would be less likely to exaggerate this per centum, than the Chairman of the Board of Lunacy Commissioners: and

2. That he doubtless took into account the cases due to intemperance as an indirect cause, and the intemperance of parents as causing insanity and idiocy in their offspring.

Bucknill & Tuke place in their list of causes of Insanity, arranged in the order of their frequency and importance, Intemperance as the larger and greater cause.

They verify their views by statistical evidence from the French, English and Scotch reports of the Commissioners of Lunacy, as well as the carefully prepared statements and tables of Skaie, at Morningside; Dr. Needham, at York Lunatic Asylum; Dr. Clouston, at Cumberland and Westmorland, and Drs. Kirkbride, Lee and Earle, in American Institutions. *

Sir W. C. Ellis, M. D., Superintendent of Wakefield Asylum, England, in his treatise on Cause and Cure of Insanity (1838), recognizes intemperance as a prolific cause of insanity. †

Samuel Wilkes, M. D., in his lectures on diseases of the Nervous System, says:

"Certainly one of the causes most frequently instrumental in the production of an atrophy of the brain is drunkenness, or the excessive use of alcoholic drinks." ‡

Alcohol causes a degeneration of all the tissues of the body, its direct effect on the liver is cirrhoses, on the kidneys Bright's disease, and fatty degeneration of the tissues thus caused explains the frequent death of the drunkard by heart disease.

Dr. Wilkes compares the degeneration of the tissues from the excessive use of alcohol to those processes which take place naturally in excessive old age. He says, "a drunken man is literally living too fast." §

** (5) (Evidence before Parliamentary Commission, 1859).
* (6) (Bucknill & Tuke, Psychological Medicine, p. 98, *et seq.*)
† (7) (Ellis on Insanity, p. 97, *et seq.*)
‡ (8) (Wilkes' Diseases of the Nervous System, p. 211.)
§ (9) (*Ibid.*, p. 212.)

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The post mortem, says the same high authority, of a confirmed drunkard, shows that the brain is shrunken and weighs so many ounces less than it did when healthy. *

The legitimate effect upon the brain of the excessive use of alcohol is to produce atrophy of that organ.

Whatever arrests normal action, interferes with function and leads or tends to decay or degeneration.

DR. HENRY MAUDSLY gives a chapter "concerning degeneration" in his admirable treatise, "Body and Will," in which he defines degeneration, as he calls it, as an "unkinding, or the undoing of a kind."

The abuse of the use of alcohol produces a degradation of the organ, by shrinking it, from its normal conditions, into a lower, lesser, or baser shape, and while alcoholic atrophy of the brain is not the degradation of which MAUDSLY so splendidly treats, it resembles it, in physical results, in the life and health of the sufferer.

PROF. JOHN J. REESE regards intemperance as one of the chief causes of idiocy. †

DR. WILLIAM W. IRELAND, a high authority upon idiocy, places heredity foremost among causes of idiocy, and does not agree with the authorities that place intemperance so high as a cause of idiocy—while he concedes that it is an important cause.‡

He says of drunkeness in the parents: "The children of drunken parents in many cases have an unhealthy, nervous system; they are weak, unhealthy and excitable, and often have a diseased craving for spirituous liquors, but, in my opinion, idiocy is not the ordinary legacy which drunkards leave to their children."

DR. LANGDON DOUN lays great stress upon intoxication of the parent at conception as a fruitful cause of idiocy. §

TOUSSENEL advances similar views.

LUDWIG DAHE, the Norwegian writer on Insanity, is of the opinion that to the abuse of brandy especially in the fathers, but also in the mothers during pregnancy, may be assigned an important influence in the production of the large number of idiots in Norway.††

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* (10) (*Ibid.*)

† (11) (Reese Medical Jurisprudence and Toxicology, p. 543.)

‡ (12) (Ireland's Idiocy and Imbecility, p. 26.)

(13) (*Ibid.*)

§ (14) Monde des oiseaux, p. 196, quoted in the Physical Problem, by Charles Elam, M. D., London, 1869.)

†† (15) Insanity in Norway, by Ludwig Dahe, quoted by Ireland on Idiocy, p. 27.)

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THE CONNECTICUT COMMISSION ON IDIOCY, in a report made to the Legislature of Connecticut, in 1856, reported that the parents of idiots were given to intemperance in drink in seventy-six cases out of two hundred and thirty-five. In thirty of these cases both parents were intemperate, in forty-six cases one parent so.*

T. S. CLOUSTON, M. D., in his able lectures delivered before the students at the University of Edingburgh, speaking of causes of Insanity, says: "It is unfortunately the most common of all the causes of the disease; in some cases producing it *de novo*, in others bringing into activity, hereditary and acquired brain weakness."

He assigns alcohol as a cause, in whole or in part, in from fifteen to twenty per cent. of the cases of mental diseases, taking all of Scotland as a basis.†

MOREAU DE TOURS, whose studies of human degeneracy, like those of his countryman MOREL, have thrown more light upon these topics than any of our English-speaking writers, agree that the abuse of alcohol is one of the greatest factors working in the degeneracy and deterioration of the human species, when measured by its past results upon the race.

These degenerations are transmitted, by laws of heredity, from father to son, and seem unable to be corrected or eradicated.

Their manifestations are Insanity, idiocy, ugliness, deformity, incapacity for higher education, lack of self-control, and what we may denominate the excrescences upon the normal human stock.

Its manifestations are degeneration of organic tissue, reproduced and intensified, which are rarely ever cured, modified or overcome.‡

DR. EDWARD C. MANN says: "Alcohol eventually will have to be dealt with as a source of terrible moral and physical deterioration. The whole human race is deteriorated by the poison, morally, mentally and socially. The disease of inebriety is transmitted hereditarily, causing insanity, epilepsy and idiocy, or a procilivity to crime."§

PROF. STANFORD E. CHAILLÉ, M. D., Tulane University of Louisiana, says: "The most frequent and important lesions found in the bodies of dead drunkards are of the same nature as those produced by old age. Fibroid, fatty and chalky degenerations, gradually invade the tissues and unfit them to maintain health and life. By these degenerations, vital force

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* (16) (Report of Committee on Idiocy, to Connecticut Legislature, New Haven, 1856.)

† (17) (Clouston Mental Diseases, p. 312.)

‡ (18) (Psychole Morbide, by Moreau de Tours.)

§ (19) (Alienist and Neurologist, January, 1887, p. 98.)

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is prematurely lowered and exhausted, and the constitution is so impaired that there is far less power to resist disease, so that it is notorious that the abusers of alcoholics greatly increase their liability to death, by accidental injuries, and by epidemic and other diseases, and that, if these fail to shorten their lives, decrepitude, old age and death come on before their time." *

DR T. D. CROTHERS, a very high authority, says: "It is a fact beyond question that alcohol in excess produces changes of brain circulation and nutrition, also vaso motor, paralysis with congestion, and derangement of the heart's action and diminution of the quality of the blood. The result is that both brain and nerve function are impaired, and the capacity to realize the nature and consequence of conduct and thoughts are lessened—the victim is actually and literally on the road to insanity. The inebriate cannot be sane, for his brain is physiologically and pathologically changed."

Dr. WILLIAM G. STEVENSON, a high authority, and a most careful and analytical observer, in speaking of the neurotic origin of criminality, says:

"That inebriety, insanity and crime bear close relationship to, and as results of pathological conditions of nerve tissue, are co-relative of each other."

"It is a fact that inebriety, insanity and criminality are hereditary and undergo mutual metamorphoses during stages of transmission."

It is a fact that drunkenness or dipsomania is a physical disease, depending on some molecular change of nerve tissue, as the direct effect of alcoholic poisoning, and the "gemmules" of this tissue, when transmitted, become active factors in the formation of character."

The same high authority says: "It is an admitted fact that inebriety in the parent predetermines insanity in the offspring. †

DR. DODGE, the late Superintendent of the Binghamton Asylum for Inebriates, says:

"It is important to keep in view that drunkenness is as often involuntary as voluntary; that the person afflicted with the tendency to it obeys a law of its members more potent than his will." ‡

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* (20) Abuse of Alcohol, p. 17.)

(Private letter from Dr. Crothers to the author of the paper, in response to an inquiry.)

† (21) (Criminality, a paper read before Medico-Legal Society, N. Y.)

‡ (22) (*Ibid.*, on the authority of Dr. W. G. Stevenson.)

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DR. RUSH reports the case of an habitual drunkard who, when urged to leave off drink, replied:

"Where a keg of rum in one corner of a room, and were a cannon constantly discharging balls between me and it, I could not defrain from passing before that cannon in order to get rum." *

MACNISH, in his *Anatomy of Drunkenness*, cites the case of a man to whom a friend painted "the distress of his family, the loss of his business and character, and the ruin of his health," who replied: "Alas, yes, this is too true! but I can no longer resist temptation; if a bottle of brandy stood at one hand and the pit of hell yawned at the other, and I were convinced that I would be pushed in as sure as I took one glass, I could not refrain."†

DR. HOWE, of Massachusetts, claimed that out of 300 idiots investigated by himself, one hundred and forty-five were descended from intemperate parents. ‡

In the various plans of classification of mental diseases, submitted by the Alienists of various countries through the several members of the International Committee, named at Antwerp, at the conference held under the auspices of the Belgian Society of Mental Medecine, in September, 1885, for the purpose of agreeing, if possible, upon a uniform classification as a basis of International Statistics of the Insane, for all the world, "Insanity produced by intemperance" has been generally recognized by the representatives of all the countries.

In the paper presented by DR. LEFEBVRE, of Belgium, "Insanity produced by Intoxication" was proposed as one of the eight types submitted. The plan or basis agreed upon by the German Alienists, at Frankfort-on-the-Main, in 1881, named six types of Insanity, of which "Alcoholic Delirium' was one. §

The WESTPHAL plan, as shown in his psychiatrical Clinic announced in the POYCHIATRY ANNALS of 1885, and plan agreed upon at WIESBADEN, included MANIA-A-POTU." ‖

THEODORE MEYNERT, in his paper read before the AUSTRIAN-HUNGARIAN SOCIETY OF PSYCHIATRY, in response to the action of the BELGIUM conference, cites the last two, and submits a classification embracing five classes with sub-divisions, the fifth of which was "TOXICAL MENTAL

* (23) (Report on Causes of Idiocy to State of Massachusetts.)
† (23a) (Anatomy of Drunkenness, p. 163.)
‡ (24) ("Stevenson on Criminalty.")
§ (25) (Medical Legal Journal, Vol. 4.)
‖ (26) (Clark Bell on Classification of Mental Disease.)

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DISORDERS," viz: ALCOHOLIC DELIRUMS — OTHER INTOXICATIONS.*

PROF. SENATOR ANDREA VERGA, in the plan proposed by him for Italy, named "Alcoholic, or Toxic Neurosis," as one of the sub-divisions of his classifications. †

PROF. BENEDICT, OF AUSTRIA, submitted as the fourth of his seven distinct types: Delirium Tremens—Chronic Alcoholic Insanity—Periodic Dipsomania. ‡

In the admirable plan submitted by PROF. WILLE, the International delegate for Switzerland, dividing into five classes or types, he names: "Psychoses by Intoxication," sub-divided as follows: "Alcoholic Psychosis—Other Psychosis from Intoxication." §

In the English plan submitted by Dr. H. HACK TUKE, the British member of the International Committee, "Alcoholic Insanity" is recognized as a sub-division of the general type or class of "Mania." ‖

In the tables proposed by Dr. MAGNAN, the French member of the International Committee, he submitted as one head, "Mental Alienation by Intoxication, or by any Toxic agent to be named."††

At the conference of American Alienists, called by the American member of the International Committee, at Saratoga, N. Y., Sept. 8th, 1886, presided over by the celebrated PLINY EARL, M. D., a basis was unanimously agreed upon of eight general divisions, of which "Toxic Insanity was the seventh, including Alcoholism and all Insanity from Toxic Causes." §§

A similiar sub-division was agreed upon by PROF. MIERZEJEWSKI, the member for Russia, on conference with the Society of Psychiatry, of St. Petersburg. ‡‡

DR. STEENBURG, OF COPENHAGEN, who represented the Scandinavian countries in his plan, named seven divisions, of which the fourth was "Alcoholic Insanity," with the following sub-divisions: 1. Delirium Tremens. 2. Chronic Alcoholic Insanity. 3. Periodic Dipsomania. ‖‖

We may then safely assume that science throughout the world recognizes the abuses of alcohol, not only as the greatest and most direful cause

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* (27) (*Ibid.*)
† (28) (*Ibid.*)
‡ (29) (*Ibid.*)
§ (30) (*Ibid.*)
‖ 31) (*Ibid.*)
†† (32) (*Ibid.*)
§§ (33) (*Vide* Report to Medico-Legal Society, Med. Legal Jour., Vol. 3.)
‡‡ (33) (*Vide Ibid.*)
‖‖ (34) (Clark Bell on Classification of Mental Diseases.)

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of Insanity known to the race, but that it recognizes Alcoholism, in some of its various forms, as a distinct type of Insanity.

The mission of the English Society for the Study and Cure of Inebriety is of the highest importance. If, by your labors, you can benefit the future of humanity, by a better understanding of the causes that have led, and are tending, to the degeneracy of mankind. If, with such knowledge, you can, in any sensible and practical way, arrest or lessen the ills of Inebriety, you will have accomplished a great good.

The study of Inebriety, and the cure of it, are now attracting world-wide attention. It is recognized by science as a disease; but has the popular mind and heart so recognized and conceded it?

Before legislation can lend its strong hand to defend the body politic, by preventative measures, based on the safety and preservation of the people, from avertable ills, we must see to it that the public intellect is abreast with scientific research on the subject.

This, if I understand it correctly, is the mission of the British Society and its co-laborers, in America and upon the Continent, and, to aid your work, and to hold up your hands in Great Britian, has inspired this contribution, which I hope may be for good.

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OPIUM INEBRIETY.

By Ira Russell, M. D., Winchendon, Massachusetts.

Ex-Vice-President of the Massachusetts Medical Society; member of the American Association of Superintendents of Insane Asylums; N. E. Psychological Society; Mass. Medico-Legal Society; New York Medico-Legal Society; Sup't Family Home for Treatment of Mental and Nervous Diseases, Winchendon, Mass.

The victims of morphine inebriety are much more numerous than is generally supposed. They are found among all classes in the community, but more frequently among the refined and the well-educated, in the higher walks of life. I have had under treatment in my "Family Home" lawyers, physicians, clergymen, merchants and bankers; wives of physicians and other ladies of culture and refinement. One of the most striking peculiarities of the opium habit is the skill with which its victims conceal it; not unfrequently the nearest friends know nothing of it.

Not long ago, I had under my care the wife of a noted physician; she had taken morphine for seven years without her husband's knowledge, and when she came to me was taking it at the rate of ten grains daily.

Another lady who came under my care recently had been taking ten grains and more daily; she often ap-

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peared strange and had strange attacks of sickness, but the true cause was not even suspected. Again and again did she attempt to cure herself, but always, as she expressed it, "ignominiously failed." Finally, confiding in but one person, and informing no one else of her whereabouts even, she placed herself under treatment and was cured; now, well and happy, she no longer conceals the fact that she was once the slave of opium.

To show how artfully the habit may be concealed, I was called, as the family physician, to see a sick lady; she begged me not to give her any morphine "for she could not take it"; my suspicions were aroused, and by a little strategy I discovered that she was taking it in large quantities. This habit is frequently concealed from the family physician, and, moreover, the general practitioners of medicine are apt to treat these cases with too much indifference. They seem not to recognize the strange symptoms of nervousness which indicate the use of opium; certainly they fail to appreciate their importance.

Take the following case: There came under my care a gentleman of fifty who was taking morphine, administering it himself, hypodermatically; his physician had prescribed it in the beginning, for the relief of some painful trouble of a neuralgic character; at length his disease assumed an hysterical form, and when not under the direct influence of morphine, he was exceedingly nervous and irritable. He would have fearful pains in his back and limbs, and would be unable to walk without

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assistance. He would imagine that he had all kinds of diseases, that death was near from heart disease or paralysis, and would exhibit intense fear and terror from his supposed impending doom. These symptoms would be relieved by the administration of his accustomed drug, to return as soon as the effect of the morphine was spent.

Such was his condition when he came to me for treatment.

He was much emaciated, was taking but little food, as everything he ate distressed him; his bowels were fearfully constipated. It was the fear of death that induced him to submit to treatment. After several months treatment, with food, tonics, baths, exercise in the open air and the gradual withdrawal of the morphine, he made a complete recovery. There are a great many cases, especially among ladies of a nervous temperament, who, from various causes—overwork, fatigue, the exacting duties of a wife and mother or the claims of society—have numerous neuralgic pains or constant restlessness, that they find can be relieved by the use of morphine, too often indifferently and carelessly prescribed by their physicians.

In fact, I do not know a case of the voluntary formation of the opium habit; some outside party, some physician or friend has been responsible for it. The effects of the constant use of morphine are analogous to those of alcoholic stimulants.

It affects, in a greater or less degree, the mental facul-

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ties, the emotions, affections, will, intellect, conscience and judgment; the change from the normal condition is not always very manifest, but there is always a change. There is generally a deterioration of the intellectual and moral faculties; I concede that some of the profoundest thoughts of Coleridge and the brilliancy of DeQuincey, were inspired by opium; so were some of the master-pieces of Byron, Burns and Poe inspired by alcohol; but the generally observed effects of opium upon the intellectual faculties are seen in the loss of memory, impaired judgment, and dullness of observation. The moral faculties also suffer, the sense of right and wrong, of duty and responsibility, are impaired; the fastidious lady is less particular about her personal appearance, the business man is neglectful and forgetful, the professional man, the lawyer and clergyman may be witty and brilliant, but are sure to lack in logical precision.

Those addicted to opium suffer from the consciousness, that they are under an influence which they are powerless to overcome.

The opium habit, when fully formed, I regard as a disease, and it should be so regarded and treated. It is a brain disease; there is a change in the nerve cells; opium is a poison somewhat analogous to lead poison, its effects remaining a long time after the drug is discontinued. Its physiological and psychical effects are manifested as soon as a sufficient interval of time has elapsed since the last potion was taken.

A physician, a victim of the habit, tells me that the

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first symptom he experiences after the effects have passed off, is a peculiar sensation in his arms—a numb or pricking sensation, then an oppressed feeling in the region of the heart and lungs; a disposition to yawn and inflate his lungs, soon followed by aches and pains indescribable. Then the psychical symptoms appear—fear of heart disease, fear of death, suspicions, hallucinations, delirium, spectres, "gorgons and hydras dire" torment him. The victims of this habit, when deprived of the drug, will resort to various excuses and stratagems, and to inveterate lying to obtain it; they will hide away, or run away to drug stores, or to physicians, and beg for opium to allay a toothache or a headache; or for laudanum to wash a bruised hand, the bruise being self-inflicted, and resort to devices innumerable to procure that which they know will afford relief.

Such being the physiological and psychological effects of the suspension of opium, can it be suddenly discontinued with safety?

I know there are those who claim that it can be done, and perhaps that is true, when the duration of the habit is short and the amount taken is small; but I prefer that those who advocate the sudden withdrawal should practice it, while I beg to be excused. I think that any one who has suffered in his own person the effects of the sudden withdrawal, or who has witnessed the sufferings of another, would be the last to advocate or adopt such a plan.

Take this case: A clergyman of my acquaintance, an

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earnest, faithful, devoted Christian of the Methodist Church, while a chaplain in the army contracted chronic diarrhœa, a disease common among those subjected to the hardships of army life, and took morphine for its relief with the usual consequences—the formation of the morphine habit. He made numerous attempts to cure himself, but, like all others who make the attempt, he utterly failed. His parishioners found that he was taking morphine, and, although it did not materially interfere with the performance of his professional duties, the leading men of his church thought it a great sin, and called him to an account for it. After praying over the matter, he promised, the grace of God helping him, that he would abstain ; but when the craving returned he relapsed, and took it clandestinely, and, as he took it by injection, he denied that he had swallowed any ; the deception was ascertained, he was deposed from the ministry for lying, and having no means to procure opium, he went into convulsions and died. Thus ended a useful life that might have been saved by proper treatment. I am well aware that there are those who claim to have cured themselves. The following is an instance : A gentleman, an opium inebriate, became converted, and on exposure asserted that the grace of God had cured his craving for opium. This man was undoubtedly honest, but it was ascertained that he was taking a medicine, advertised for the cure of the opium habit, it being claimed that it contained no opium, but which proved, upon a chemical analysis, to contain a large proportion

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of morphine, carefully disguised by other medicinal ingredients. So far as my observation has extended, all those who have claimed to cure themselves of this habit have been conscious or unconscious frauds. As I have said before, when this habit is formed it becomes a disease; the nervous structures, the brain cells, are in an abnormal condition, and the demand for the opium stimulants to supply this abnormal condition is overwhelming, and the will-power is utterly unable to resist this craving. Then, again, in many cases, death is the inevitable result of the loss of sleep and food and the mental craze caused by the sudden withdrawal. Can the opium habit be cured? Most certainly it can, as numerous cases bear testimony. The first step is a desire on the part of the patient to be cured. In a majority of cases it is absolutely necessary that the patient should be removed from home and the supervision of relatives and personal friends, and be placed in such a position that he cannot be supplied with the drug by himself or outside confidants; the artfulness and cunning resorted to to get the drug are truly wonderful, hence the most careful watching is required. They will conceal it about their persons, or in out-of-the-way places, and when accused of having it, will deny it most emphatically. They should be under the care of a physician who thoroughly understands the treatment of such cases. Like all other diseases, no two cases can be treated precisely alike. My plan is the gradual reduction, just as fast as it can be done, and at the same time sustain the system with nourishment and nervous tonics and such

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medicines as will produce sleep. For this purpose various methods are resorted to. Such ingredients are given, as are calculated to sustain and strengthen the nervous system—amusement and genial companionship, riding and out-door exercise. In order to secure a complete recovery, the patient should be under treatment for two or three months after the opium is withdrawn. The toleration of morphine, is truly wonderful; the quantity that can be taken without destruction of life, when the increase from a proper medicinal dose has been gradual, is perfectly enormous. Read De Quincey's "Confessions of an Opium Eater." I once had a patient, a physician from Canada, who was taking twenty-five grains hypodermically and drinking a quart of brandy daily. Another patient was taking sixty grains and a quart of whiskey daily. In both cases the stimulants were discontinued at once. In the latter, the morphine was reduced to five grains daily, when, in my absence, the patient left for home. He immediately asked his wife for morphine; he had some three-grain powders in his pocket-book, also a three-grain powder of strychnine. By mistake she gave him the strychnine and he died almost instantly. The physician referred to, after four months' treatment, remained free from the habit, for nearly a year, when he began to take stimulants, and while under their influence, took an overdose of morphine and died. I have recently had under my care a lady, the widow of a physician, who had been taking thirty grains daily.

In one month I reduced the quantity to four grains

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daily, without any great suffering; after that the reduction of one-fourth of a grain was severely felt. As a matter of fact but few morphine inebriates take such large quantities as those referred to above, but the cure is none the less difficult. The tug of war comes when the last, least quantity is withdrawn.

It is this fact that render self-cure so difficult if not impossible. I, at one time, had under my care a physician who had made several attempts at self cure. He had several times reduced the quantity to one-sixth of a grain daily, when the will became powerless to resist the craving. The loss of sleep, the loss of appetite, the nervous prostration, the neuralgic pains, the uncontrollable diarrhœa, are too much to be borne, and the will succumbs to the demand for the drug. I have no faith in the vaunted remedies that have been so highly extolled; the gold, the avena satira, the colerina, the cocaine: the first three are useless. the last-named dangerous. The cocaine habit is worse than the morphine habit. It is always well to combine the sulphate of atropia with morphine, one one-hundredth part of a grain, and continue it of the same strength while the morphine is lessened. Chloral, bromides, hyosciamus and cannabis-indica, can be given to procure sleep and allay nervous irritability. Food and tonics are necessary to sustain the strength.

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VALEDICTORY ADDRESS

By Dr. A. K. Steele,
President of the Medico-Legal Society of Chicago.

(Pronounced June 4, 1887.)

Fellow Members: The Medico-Legal Society of Chicago was organized May 15, 1886, barely one year ago, with an original membership roll of nearly one hundred persons, representing the medical and legal professions of this city and vicinity.

It had for its objects "the investigating study of the science of medical jurisprudence, the punishment of unprofessional and criminal practices by members of the medical and legal professions, the prevention of blackmail and the procuring of such legislation as may be necessary to secure the ends above enumerated."

As its inception and successful organization was chiefly due to the personal efforts of Dr. E. J. Doering, I felt that he should have been your first presiding officer and guiding genius, but his firm declination of the intended honor, on account of other important official duties in a sister society, compelled you to postpone his election, until this year. Placed in this position, therefore, quite unexpectedly and unsolicited, I assumed its duties with a considerable degree of reluctance, and with

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misgivings as to my abilities to carry out the orders of the Society with satisfaction to a large and exacting membership.

YEAR'S WORK.

The first year of this Society has been an uneventful one. The attendance upon meetings has not been as large, nor the number of papers presented as numerous as our membership would warrant. In fact the modesty of our members in this respect, has been phenomenal for citizens of Chicago.

Immediately after our organization the Executive Committee decided not to take cognizance of any suit brought against any member for alleged malpractice, where the cause of action at law, occurred prior to his becoming a member. You very kindly and unanimously endorsed this action at your first quarterly meeting. The object of this resolution is self-evident, and the wisdom of your Executive Committee, in securing its passage has been demonstrated during the investigation of a number of cases, brought to their attention throughout the year. The society has not been called upon to espouse the cause of any defendant, in an alleged malpractice suit during the year. Neither have we expended any money for legal services, as we did not deem it to be good business policy, to retain an attorney for the Society, until we had some need of his services. Unofficially we have been consulted, in a number of ways in regard to suits, pending against members of this Society, that could not be otherwise considered.

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Death has removed from our membership roll the name of *Dr. James Stewart Jewell*, one of the most distinguished alienists and neurologists in this country. A man whose name is familiar to medical readers everywhere, by reason of his scientific contributions in that department of medical science to which he devoted his rare talents with indefatigable industry.

A few months before his death I called at his office to request him to prepare a paper for this Society. As he came into the room his wan appearance, and feeble gait caused me to regret stating the object of my call, but I did so, and at once the old enthusiastic light of the student and scholar brightened his eyes and animated his voice as he cheerfully assented, provided his health permitted, and in his usual calm, deliberative way, he told me that he had for some time been contemplating the subject of preparing a paper on a medico-legal topic, and wrote me and handed me, on a card, the title which is now in my possession: "Critical Examination of Certain Fundamental Points in Medical Psychology as they Relate to Insanity before the Law."

I shall always remember this interview, it was the last time I ever saw our late distinguished member, as his health failed rapidly and the end soon came, depriving the Society of all except the title of the promised paper.

One of our best-known members belonging to the legal profession has been advanced to a prominent municipal position and will soon adorn the bench. I

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refer to corporation counsel O. N. Norton. I regret the small membership of lawyers in our Society and trust that through the personal efforts of members, the number many be greatly increased, so as to render it a most distinctly representative scientific medico-legal society. In order to induce a larger membership of lawyers, that clause in our by-laws relating to assessments for unusual expenses in defending suits brought against physicians, was amended so as not to include lawyers.

LIBRARY.

The subject of the establishment of a library containing all the valuable works on medical jurisprudence and allied subjects, was broached to me by our late Secretary but was not favorably considered, as I believe the public library and the library of the law association will meet the wants of our members much better and at greatly less expense than an independent library supported by our Society.

I desire to express my indebtedness to Mr. Clark Bell, President of the New York Medico-Legal Society, for several valuable reprints of papers read, and copies of the transactions of their society, journals sent, invitations to banquets, and request to participate in the formation of an improved nomenclature for nervous and mental diseases, etc. Also to Dr. A. B. Stuart, of Santa Rosa, California, for letters and papers received through Dr. Doering, relating to the formation of a Medico-Legal Board by the State Medical Society of California, and a

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full report of the celebrated case of Winters *vs.* Grous, that has attracted such wide attention.

SUGGESTIONS.

Fortunately, during the past year your Executive Committee has had but little work to perform, but as the success of the Society and the continued confidence of its members in the necessity for its existence rests largely upon the selection of men of acknowledged ability fairly representing the different departments of medicine, therefore due care should always be exercised in this direction to have law, medicine, surgery, ophthalmology and atology, obstetrics and gynæcology, represented on your executive board.

PAPERS.

Continued efforts are necessary to secure papers on suitable topics, and I feel quite certain that I may be permitted to congratulate you on your good fortune in securing as your President for the ensuing year, Dr. E. J. Doering who, by his industry and ability, contributed so largely to the success of the Chicago Medical Society, and whose name is a guarantee for the successful completion of whatever he undertakes. It has the *Do* with a *ering* to it, *Doering during* the year means *doing*, and his success in professional life has been no greater than his success in stimulating medical workers; hence, I know, the papers will be forthcoming. It is a source of personal gratification to be able to transfer the duties of the office into such capable hands.

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CRIMINALITY.

By William G. Stevenson, M. D., of Poughkeepsie, N. Y.

The evolution of humanity has ever presented problems to be solved and phenomena to be interpreted; and eager minds, in all ages, have striven to obtain the key which would unlock the mystic laws of creation, and reveal to man the rule which directs his actions and defines his responsibilities. In this effort, the struggle of the human mind has been long and arduous, and the sources of knowledge have been as many and varied as have been the answers given or results obtained.

Ignorant alike of his origin and destiny, unable to comprehend the relation he sustained to external nature, or to interpret her phenomena; impotent to resist the influence of the unseen but mighty forces which constantly displayed themselves in his presence—man recoiled in terror, and in abject fear prostrated himself before the power which exhibited itself in such majestic but terrible grandeur. He ascribed to these blind forces personalities, and supplicated them as gods, to gain whose smiles or shun whose frowns an ignorant humanity propitiated by offerings and sacrifices.

Read before the Medico-Legal Society, May 2d, 1877.

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Thus was erected the shadowy structure of mythology, whose foundation-stone was ignorance, and whose framework was composed of the capricious imaginations of an infant age. But as by observation and experience man learned to know the truth, and thereby to dissipate the superstition of the past, so, by the accretion of knowledge, he began slowly but surely the demolition of this delusive structure, and it tottered to its fall. Yet as the light from a distant star is visible for a time, even after the star substance is blotted from existence, so the shadow cast by the colossal illusions of primitive man has come fleeting down the ages, leaving on all distinct impressions, and even tinging the present with its phantasmagorical character.

The human mind, no longer a blind worshipper, but an intelligent interpreter of phenomena, has made many and important discoveries in the realms of nature. No longer do the patristic doctrines, with their false cosmogony, influence and deceive the world. Science, as now interpreted, takes measurement of infinite space and inconceivable magnitudes; analyzes stars and nebulæ, and determines the forces which aggregated suns and hurled the planets onward in their orbits; it probes the earth, and from its secret depths takes evidence of time, infallibly demonstrating the æons necessary for the forming of the earth and developing the life thereon; it grapples with power, and makes the universal laws of nature subservient to its purposes.

The correlation and conservation of forces are estab-

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lished, and give to heat, light and electricity a common origin.

From the swinging of the pendulum and the rush of worlds in space; from the dew-drop sparkling on the blade of grass and the wide expanse of sea; from the light which flashes through the heavens, kissing the earth in gladness and with such delicate tinges touching the hills and vales, lavishing beauty and perfume upon their trees and flowers; from the crystal whose fixed axial ratios give to each variety definite and invariable form, building in strength the foundations of the earth; from the organic cell of the fungus, so lowly and humble in life, and the organic cell whose action produces man and evolves human thought—from all these, from everything in nature, there is evidence of invariable law, whose action fills the world with music both rythmical and sweet.

Man himself is of and belongs to nature, and his every action and thought are in obedience to vital laws. True it may be that the problems of his own existence are more complex and difficult of solution than those of inorganic nature; but nevertheless they are within the domain of law which is universal, and which is ceaseless in its workings.

We see all the displays of nature bound in the chain of cause and effect. We acknowledge the obedience of man to law in all the manifestations of bodily function. And now let us ask, with a sincere desire to know the truth, is there not some rule or law which influences the

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acts of man, and, in proportion to this influence, are not his responsibilities under law directly modified?

It is man's prerogative to make inquiries of things around, to investigate, explore and learn. He does indeed believe before he knows, but his belief is ever mingled with doubt; the doubt, not the belief, stimulates him to research; and research, by increasing knowledge, banishes doubt and thereby changes belief. His inquiries established facts, and facts have accumulated through continued inquiries, until now he knows that the world is ruled by laws so fixed and immutable that the human mind not only measures back the flight of ages, solving the mysteries in the morning of the world, but with prophetic vision sees and demonstrates much that is to be in the distant future. And yet the human mind is finite, and there are limits to its searchings; it cannot penetrate the veil which hides creation from its view, nor fathom the mysteries of "that undiscovered country from whose bourne no traveler returns." The primal source and essential nature of matter in its varied forms, of energy, whether physical or vital, are as yet an incomprehensible mystery.

In studying the philosophy of human action, I fully recognize the limited extent of exact knowledge relating to the union of body and mind, and their mutual influence on each other; but I also am aware of the many facts revealed by studied observation and experimental research in nervous physiology, and entertain no doubt that the evidence is sufficient to enable us to determine.

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with approximate accuracy, at least, the bodily and mental conditions which give the bias to individual character.

No method based on introspective deductions can give a satisfactory interpretation of mental phenomena, any more than the same method can account for the phenomena of the physical universe; because the evidence evoked from the depths of human consciousness can furnish no perfect standard by which to measure the conditions of human action. This will appear evident when it is remembered that the value of self-consciousness depends largely, if not entirely, on the amount of knowledge possessed by the individual, for without knowledge there can be no correct interpretation of facts; and since the acquisition of knowledge differs in every individual, both in quantity and quality, it necessarily follows that the interpretations of self-consciousness must present widely different results, and be destitute of any positive value. We must therefore appeal to the evidence derived from the examination of particular cases, and only generalize into laws or rules of action after observations have established facts as data for conclusions.

Investigation has abundantly demonstrated, as a fact of primary importance, that nerve tissue is essential to the production of, at least, the higher phenomena of animal life, and that these phenomena vary in degree and character in proportion to nervous development. From the lowly forms of animal life, whose nerve centres produce only reflex action in its simplest expression, up-

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ward through every series of progressive development, with the super-additions of nerve centres, which add to the complexity of nerve function, there is accumulated evidence that every such additional centre furnishes a source of new power, potentially capable, within certain limits, of modifying the action of the subordinate centres, yet, nevertheless, incapable of wholly negating their specialized functions. Thus the organic nerve cell presides over nutrition, and, so far as the simple vegetative growth of an animal is concerned, its action is all-sufficient; but in order to connect simple organic growth with the phenomena of animal life, an additional centre of force is needed, and there is evolved the reflex centres of the spinal cord, which unite vegetative growth with animal action. The sensory centres being next evolved, there is the possibility of sensory added to organic and reflex action. But there is no consciousness of life, of motion or sensation; evolution goes on, and the brain becomes the conscious centre of that energy which presides with such mysterious power over the thoughts and actions of man.

To fully understand the functions of the brain necessitates a knowledge of the functions of the spinal and sensory centres, for there are many acts performed by man which bear the semblance of conscious volition, and yet, when correctly interpreted, give evidence of automatic action only of the reflex centres of the spinal cord and sensorium. Although a few cases have been reported in which, apparently, limited nerve action resulted

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without the existence of the proper nerve elements, as fibres and cells with their prolongations, yet it is an accepted fact that nerve force exists only within the boundaries of the nervous structure, and that this nerve force is generated not only in the cells, but also in the fibres, as seen when they are at rest. In a limb removed, for example, oxygen or strychnia restores nervous energy after its complete exhaustion.

Nerve force is not generated by any volitional effort. As magnetic, frictional and statical electricity are only different forms of expression of the same energy, so a simple impression, sensation, ideation, emotion and volition are but different forms of expression of the same nerve force, and come from the special molecular structure of the organ through which they are manifested. This unity of nerve force precludes its intense expression in more than one way at a time, so that if there is great bodily fatigue, mental work is impossible, and *vice versa;* neither can volition hold full sway in the presence of deep emotion.

Nerve energy is transformed into motion, as evidenced in muscular action ; it is also transformed into heat, but it is not known whether this is an immediate or secondary result. There are a few instances recorded which seem to show its transformation into light, and it is well known that in certain animals electricity is the direct result of its metamorphosis. From these data the conclusions seems authorized, that at least a partial correlation exists between the physical forces and the energy

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resulting from nerve action. I say a partial correlation, because, while the evidence may permit the conclusion that nerve force is transformed into motion, heat, light and electricity, it does not justify the conclusion that these can be re-converted into nerve force.

It is important to remember that the character of nervous and mental phenomena is determined by the condition of the nerve centres, whether the condition is one of development of the centres themselves, or of modification by disease, or by foreign substances. The existence of the spinal cord alone predicates the possible existence of automatic reflex action, which, though unconscious, gives evidence of the use of means to a special end. Add to the spinal centres the medulla oblongata, and there result the involuntary and unconscious co-ordinate muscular movements of respiration, swallowing, coughing, and simple exclamation. Unconscious sensations of pleasure and pain, of taste and hearing, come by the addition of the annular protuberance, while the tubercular quadrigemina alone give visual power. The cerebellum co-ordinates the muscular movements of the body, while the cerebum not only determines the nature of the mental life, but it alone is able to bring the varied sensations of nervous action within the domain of consciousness. The existence of these several general centres is therefore necessary in order that the many acts of human life may be performed, and as a necessary corollary, it is found that in proportion as any centre is undeveloped, diseased or modified, nervous or mental action will be

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changed, limited or arrested. That mind is influenced by, and is dependent on, the physical condition of the brain, is again evident when we remember the effect caused by a poisoned blood, on all mental expressions. Hashish, opium and alcohol, for example, weaken the will, exalt the automatic action of the brain, disturb perception, exaggerate self-consciousness, distort the emotions, dethrone reason, and cause moral turpitude. Diminish the normal blood supply to the brain and the mind changes its character; restore the needed amount, and the mind promptly responds to the altered condition.

Old age, injury, fatigue—anything which impairs the normal nutrient action of the nervous centres of thought —directly modifies intellectual and moral manifestations; and the conclusion is irresistible, that every psychical manifestation has a physical antecedent, and that cause and effect are as certainly established within the realm of mind as of matter. To explain the "how" and the "why" of mental action as a result of physical conditions is impossible. So, too, is it to explain how electricity comes from the union of metals with an acid; or how life springs from a seed, or perfume from a flower. They are ultimate facts, and as such are beyond explanation; but, however complex the problem, the fact remains that definite conditions invariably produce definite results.

In solving the problem of criminality, it is my purpose to rely chiefly on the evidence of nervous physiology; and while I shall not be able to present in detail the many

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facts at hand relative to mental phenomena, I shall nevertheless endeavor to cite such as may be needed to sustain the position that criminality is a neurosis, originating in either an inherited or an acquired condition of the brain, whether it be a condition of positive disease or of non-development of certain faculties—the existence of which would preclude the possibility of crime.

At the very threshold of the inquiry, it is important to know the relative qualities of men which pertain to their acts in life, for, if equality exists, it is evident that we may the more easily formulate a rule by which to measure human action; whereas, if equality does not exist, it is apparent that we must measure each person's acts by some standard of his own, with special reference to his individual organization and surroundings. The question of equality may be considered from the dual standpoint of actuality and possibility; that is, are men equal in physical and mental endowments, or, if not, are they capable of being equal in the attributes of either body or mind.

As to the first proposition, the actual equality of men, I will only say that the negative is so self-evident as to need no demonstration. We have only to look around us anywhere and everywhere, and the fact becomes glaringly evident that in physical prowess, at least, a great inequality exists; that which one person is unable to perform, even when under the influence of well-regulated discipline, another easily accomplishes, and we correctly impute to the latter a greater natural strength.

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Each individual link in the great chain of human life has potentially a specific, a personal strength, which is measured by the amount of tension or strain each can endure ; or, in other words, the amount of active energy each is capable of exhibiting. This inequality of energy, whether active or possible, extends beyond the physical into the intellectual and moral nature of man.

The actual existence of intellectual and moral inequality is even more marked than the physical. Between the intellectual standard of the untutored Australian negro and that of a Newton or a Shakespeare, or between the moral standard of the most depraved criminal and that of a St. Paul, there are as many varieties as there are individuals of the race.

In the mind, as well as in the body, there is also an inequality of possible power. Each individual of the human race possesses a certain brain organization, which will admit of intellectual and moral development to a certain degree ; but no discipline, no method of education, no power of the will, can advance it beyond this limit. Thus far and no farther, is the dictum of creative energy.

The eye has vision only within the limits of the visible spectrum, beyond which all is darkness. The ear can discern sound only when the vibrations are within well-defined boundaries, beyond which the harmony of music is either lost in the discords of noise, or the vibrations are so rapid that nerve tissue is powerless to convert them into sound ; and yet that which may prove the

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limits of the visible spectrum or measure the power of audition to one person, may not to another. We know that certain animals can see where all is darkness to man, and hear sound when, to the human ear, all is silence. So, too, with the human brain. One is capable of receiving and assimilating certain impressions of a specific nature, by which a definite character of mind is formed, while another is so organized as to receive and assimilate impressions different in quantity and quality, and there results a mind of peculiar endowments and powers. And here it is important to observe that the reception of impressions by the brain does not of necessity predicate the nature of their assimilation; for as the different elements of food to the general system are selected and assimilated by different tissues, and produce bone, muscle, nerve and blood, so the nature of the assimilation of mental impressions varies according to the potential nature of the brain tissue, whose duty it is to transform impressions into ideas and modes of thought.

The inborn capacity, or potentiality of brain tissue possessed by Newton, made it possible for him to so assimilate mental impressions, to take such a periscopic view of things, as to evolve from the depths of his mighty mind the laws by which atoms aggregate to suns and worlds are held in their orbits. His discoveries were not of chance, but of necessity, and the inherent qualities of his brain, made his mode of thought an irresistible destiny.

The acts of each and every man, whether of humble or exalted mentality, are but so many scenes in the great

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drama of individual life, but panoramic views constantly revolving before us, moved by machinery behind the scenes; that machinery is the human brain, which, in proportion to each individual capacity, gives forth, in the human mind, the power to act.

The idiot possesses an inferior brain organization, and necessarily an exceeding low order of intellect; indeed, were it not for his human form, he would not outrank many types of lower animal life.

Why the difference in two children who start in life under the same conditions of bodily and mental discipline? Evidently not because of early opportunities, for herein both were equal; but the difference comes from the potential character of brain tissue, which in one gave great inborn capacity to assimilate impressions, while the other was unable, because of an inferior or weaker inborn capacity of brain structure, to receive more than the simpler impressions from his life's experience, and his mode of thought and action correspond with the statical energy of his organization.

Nations and peoples differ from each other in their ideas of law and civil government, religion and morals, and these differences have existed from the earliest monumental history of man, and as strongly mark the present diversity of races as do the color of skin or form of skull. These intellectual variations result from the different brain capacities of the several species, and thereby absolutely preclude an intellectual equality except through amalgamation, by which the superiority of

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one is depressed, while the inferiority of the other is elevated, until a temporary equilibrum is produced.

So, too, with the individual elements which form each and every human variety ; each possesses a brain organization of definite statical power, capable of receiving and assimilating a specific amount of impressions, from which is evolved energy of a specific quality. One person exhibits a character pre-eminently noble, unselfish and brave, which shrinks from no labor, however arduous, nor fears danger when in the discharge of duty; the altruistic element predominates, and he becomes a benefactor of mankind. Another is egotistic, seeking only his own good, regardless of the claims of others, without charity or love, as vulgar in mind as he is cowardly at heart, to whom appetite is synonymous with duty, and to whom obedience to law, through fear of penalty, seems an abridgment of human liberty. Between these examples there are as many distinct characters as there are individuals of the race, and who is there to proclaim equality to all ? Intellectual and moral differences depending on organization are, therefore, known to exist, and I now come to inquire relative to the transmission of these differences from parent to offspring.

That "like begets like" is a truism of general belief, and rests for its acceptance on the facts, so long observed, that whether in lower animals or in man, the general and special traits of character belonging to a parent are developed in the offspring. This repetition of similar orms and qualities is known as heredity ; a biological

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law which involves both the morphology and physiology, the form and function, or the statics and dynamics of the organism. Within the limits of specific characteristics the law of heredity is well defined, both as to form and function; and although slight variations ever exist which enable us to identify one individual from another, yet the boundary line of species defines with much accuracy the physical and mental traits which belong to them. Hence an animal that possesses a form or an instinct differing from that of its species, is a morphological and physiological monstrosity. A dog with hoofs or wings is no more a monster than is a dog whose instinct impels him to perform the actions of a sheep or a bird.

There can be no doubt, therefore, but that the heredity of specific characters is a well-established fact, and the question is thus narrowed to the solution of individual peculiarities.

The heredity of individual form or external physical characters is so well known and so universally acknowledged, that a few examples only will suffice to demonstrate the fact.

Your attention is simply called to the different breeds of cattle, of which the "short-horn" is a typical illustration, and it is at once apparent that the individual peculiarities are inherited. Does not the horse furnish strong evidence of personal heredity, thereby giving us either the strong draft-horse or the fleet courser, each having his own family likeness? Does not the pedigree

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of the greyhound, of the shepherd dog or spaniel determine the physical conformation, as well as the special qualities which give value to each individual? Assuredly, yes! It is useless to enlarge the list, for it is acknowledged by all that the bodily likeness of the offspring of the wild or domesticated animals is but a repetition of the form and features of the parent stock.

With man the same law obtains, and hence we see the child resembling either the father or mother, or some member of the ancestral line, not only in general form and feature, but in the minute details of the organization, such as color of hair and eyes, tint of skin, size of bones, obesity or spareness of body, shape and size of nose, ears, hands and feet, in movements, in voice—in short, in everything which goes to make up the general bodily *contour* or expression.

Even deviations from normal types are transmitted and retained so long as there is obedience to the laws of heredity; a noted example being Lambert, "the porcupine man," so called because of the horny excrescences which thickly covered his skin. This condition was transmitted through six generations. Polydactylism and ectrodactylism, albinism, rickets, as well as bodily mutilations, as the loss or injury of a member, are other examples of transmissible physical conditions. These deviations from the normal type open a wide field of inquiry as to the possibility of establishing new species through the influences of inheritance; my present purpose, however, is only to speak of facts as we know

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them, and as they relate to the phenomena of animal life and action.

It has been shown that heredity is potent to determine the physical form of animal life ; and the question now is, Will it also determine the functions of the organism ?

A few facts will show, first, the relative heredity of instinct, then of perception, and lastly of ideation, which will warrant the deduction to be made that heredity influences function as well as form. Birds hatched in a cage will, when liberated, build their nests of similar materials, in the same way and of the same form as do their parents ; if migratory in habits, they will take their flight at the same time and direct their course to the same latitude, guided in all by an instinct which, without the aid of experience, is made perfect by inheritance. The young squirrel accumulates its store of nuts, thereby protecting itself against the contingencies of winter, of which it has no experience ; the beaver builds his dam, and the duckling seeks the water, obedient to an innate impulse which is irresistible.

These are examples of primitive or natural instinct, which, to some degree, exists in every type of life, from the *Monera primitiva* to the *genus homo*, and which may be defined as "an act conformed to an end, but without consciousness of that end." It is an unconscious form of intelligence, whose special mode of action in the different varieties of animal forms is an exact correlative of the development of the nervous centres in these varieties. This blind, impelling force—this un-

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conscious intelligence—is transformed into a teachable intelligence when the evolution of nerve centres makes possible the existence of ideas, reason and will. Now it is that acts performed are modified whenever the surrounding conditions necessitate a change, and there is developed an acquired instinct, an addition to the primitive nature, which in like manner becomes an element of heredity.

Leroy states that where the fox is much hunted its young exhibit a more cautious and crafty nature than do old foxes in districts where there is but little warfare against them, and Cuvier explains this fact by the heredity of acquired instinct. Knight affirms that the habits of the English woodcock have undergone great change, and that its fear of man has greatly "increased by its transmissions through several generations." Darwin has discovered the fact that in those places but little visited by man the animals are very tame, and acquire fear in proportion as they learn his methods of destroying them. He also gives as a fact that small birds are less wild and shy than large ones, and reasons that it is because the large ones are more persecuted by sportsmen; for in desert islands timidity does not differentiate the two.

If the animal is teachable, it requires several generations to fix the acquired character, during which time there is a silent conflict between the acquired and natural instinct—a struggle to maintain the present acquisition, and a struggle to revert to primitive habits. This is well observed in hatching the egg of a wild bird under

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one domesticated ; for no sooner is the young one forth than it strives to obey its natural instinct and fly away, and it is only after the influence of domestication has been carefully guarded and conserved through several generations that the acquired predominates over the primitive instinct.

I now come to inquire relative to the heredity of the perceptive faculties : the senses of touch, sight, hearing, taste and smell—these inlets through which impressions of the outer world reach the sensorium, and by it are converted into conscious sensations. Here, too, we find that the law of specific heredity obtains not only in the quantity but also in the quality of sense perceptions, as a single example will illustrate ; the senses of smell and sight in the dog are markedly different in degree from the same senses in the bee or bat, and these, in turn, develop the sense of touch to a degree unknown to the dog ; these differences are the birthright of the species, over which heredity has absolute control. The individuals of each variety, however, have their own personal aptitudes, which are exceedingly varied, and for a moment we will inquire as to their transmission.

Touch is the fundamental sense, giving the most essential evidence of the external material world, through the impressions of hardness, softness, elasticity, heat and cold. Not only is there a marked difference between those who inhabit the arctics and the tropics in their ability to endure extremes of temperature, but tactile sensation also varies so that what is a painful

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sensation to one will scarcely be felt by the other; the Lapp is so insensible to tactile impressions as to almost justify the assertion "that you must flay a man to make him feel."

Of the other four senses I will say that sight is decidedly influenced by heredity, as instanced in those cases of myopia and hypermetropia which depend entirely on mechanical conditions and which are perpetuated through generations. The Fuegians have acquired by use and fixed by heredity the power of a long range of vision, surpassing even the long sight of the sailor, while short sight is engendered by intellectual pursuits. Daltonism, or color blindness, is hereditary, as is also the diminished sensibility of the optic nerves—from partial anæsthesia to perfect amaurosis.

In hearing, further evidence is added of heredity in those whose audition is limited to the diatonic scale, as well as those who have a "musical ear" with wide compass, as exhibited in one hundred and twenty members of the Bach family or in the three Mozarts.

Smell and taste are also transmitted functions, as illustrated in the acute scent of the canine race by which the dog is enabled to distinguish, with remarkable accuracy, the odors belonging to different animals and men. Gratiolet states that a young dog that had never seen a wolf became greatly excited on smelling an old piece of wolf skin; this was evidently the result of heredity.

In man the sense of smell is much less acute than in lower animals, and yet some races have it extraordi-

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narily developed. The maroon negroes of the Antilles have the imputed ability to distinguish, by this sense alone, the trail of the white man from that of the black man. Some families possess strong antipathies of smell and taste for certain articles of food, as for cheese, strawberries, etc., and it is possible that cannibalism in the offspring of savages results from an hereditary taste for human flesh.

Thus briefly have been presented a few facts relating to the heredity of the senses, and it now remains to observe its influence over those faculties or functions which are made manifest through the action of the ideational or cerebral centres. The masterly labors of Galton and Ribot have established the fact that a general law of heredity obtains in the mental, as well as in the perceptive and physical life. Memory, as a physical process of nutrition, making record of the products of ideation and imagination, either creative or reproductive, as witnessed in poets, painters and musicians, are under its modifying influence; as is also the highest exhibition of mentality in which the ego, independent of objective conditions and sensations, observes only subjective conditions and phenomena; and the emotions, reason and will manifest their energy, as exhibited in science and literature, or by the statesman and soldier. In each and every case the evidence confirms and strengthens the claims of inheritance.

Thus do we see the influence of heredity in forming the character of instinct, perception, intellect and will;

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and there yet remains the interesting question as to its influence over the appetites and passions, including all the moral impulses, either normal or abnormal, and the pathological conditions to which the physical and mental life are subject. This brings us into the immediate presence of the criminal, and invokes an analysis of those physical and mental antecedents which give the bias to his individual character, and which so irresistibly impel him to crime.

(*To be continued.*)

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IMBIBITION OF POISONS.

By Prof. John J. Reese, M. D.

My Dear Mr. Bell:

In the remarks accompanying a paper by Dr. George B. Miller on the *Post-Mortem Imbibition of Poisons*, republished in the June number of this Journal (1887), the very important and significant question is raised, or rather is quoted as having been "submitted to the chemists who were consulted" in a recent, somewhat remarkable case of suspected arsenical poisoning: "Can you discriminate by chemical analysis, on an exhumation of the cadaver, between the arsenic we are sure to find therein, (*viz.*) that which was produced by absorption, *post-mortem*, in the embalming process, from the arsenic or other poison given before death, and which undoubtedly caused death?" Or, as it is afterwards put: "Can the chemist by any means now known to science detect the murderer who poisons his victim, and at once thereafter fills the body with an arsenical solution, under the pretense of embalming it, using an extra large quantity purposely?"

The case of suspected poisoning which has given rise to the above queries, is both interesting and instructive; and the circumstances attending it are strongly suggest-

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ve of guilt, on the part of the accused. I am further of the opinion that this is by no means a solitary instance of such a criminal procedure. I will, therefore, with your permission, endeavor to reply to the above questions, seeking to throw such light as I may be able upon a confessedly obscure subject.

The subject of the *Post-Mortem Imbibition of Poisons* has not, I think, received from toxicologists and medical jurists that degree of consideration that its importance demands. Indeed, until within a very few years past it appears to have been entirely ignored. The distinguished Orfila, it is true, as far back as the year 1847, alludes to the fact of such imbibition, based upon his own experiments on animals, and he admits the possibility of its being practiced on the human body with a criminal intent; and Sir R. Christison also records his belief in the same possibility, although he had never himself heard of an actual case.

In the year 1877, I published a paper (Trans., Col. of Phys. of Philadelphia, 1877) on the *Post-Mortem Imbibition of Poisons*, based on a series of experiments made at my suggestion, and under my supervision, by Dr. George McCracken, of Philadelphia, at the University of Pennsylvania, with a view to determine this question more specifically. These experiments, carefully conducted upon the bodies of dogs and cats with solutions of arsenious acid, corrosive sublimate and tartar emetic injected into their stomachs, conclusively established the fact of the imbibition, or osmosis, of these

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different poisons into the various organs, as the diaphragm, heart, lungs, liver, spleen, kidney and urinary bladder—these various substances being detected in the above-mentioned organs by the appropriate chemical reagents.

I do not think, however, that either the brain or spinal cord was examined at that time. The subsequent researches made by Dr. Miller, as detailed in his paper above alluded to, entirely confirm this statement ; with the additional fact that traces of arsenic were discovered by him in the brain ; and which latter assertion seems to be corroborated by some experiments made by Dr. V. C. Vaughan, of Ann Arbor, Michigan, in 1883, and by Dr. Kedzie, of the Michigan Agricultural College, about the same date.

As regards the question whether a poisonous solution injected into the human stomach after death, can penetrate by osmosis into the *brain* and *spinal cord*, although the above experiments would seem to justify our assent to the proposition, nevertheless the proof is not quite as clear and positive as we should wish ; since, in some of of these experiments, it is intimated that the solution, at at the time of the injection into the stomach through the pharynx, *regurgitated through the nostrils*, and consequently might possibly have gained access to the brain *directly*, through the ethmoid and sphenoid cells. At all events, I think that this latter question, *viz.* the post-mortem imbibition from the stomach into the brain and spinal cord, should be more thoroughly investigated

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before challenging our unqualified assent. I deem it to be a question of such vital importance in this particular connection, that its settlement should be established by the most indisputable proofs.

The importance of this question will be perceived at once. If, for example, it should be positively determined that the poisonous solution does *not* penetrate into these two great nerve centres after death, we should then be in possession of a certain and reliable means of discriminating between a poison administered before death, and one injected into the body after death ; since its discovery in the brain or spinal marrow of the deceased, by the toxicologist, would then be proof positive of *ante-mortem* poisoning ; although, on the other hand, its non-discovery in these organs, would not, of itself, justify an opposite conclusion, *viz.*, that of the *post-mortem* imbibition, inasmuch as we well know, many fatal cases of poisoning do occur without the analyst being able always to detect the lethal agent in these organs after death. I would therefore again beg to draw attention to the importance of further investigations of this vexed question, special care being taken to guard against regurgitation into the posterior nares, when the solution is injected into the stomach through the pharynx ; and also recommending the additional experiment to be made of injecting the poison through the rectum into the intestines, since the imbibition into the different viscera will take place from these latter organs equally well as from the stomach.

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In conclusion, I will endeavor to answer the final important and practical question in your article, in which the appeal is made "to chemists throughout the world": "How can we discriminate, so as to detect and differentiate the poison taken *ante-mortem*, which caused death, from the poison purposely introduced after death into the abdominal cavity, or per rectum, for the purpose of hiding the crime under pretense of embalming the body?" I believe there is no known method by which such discrimination can be made, if we have to rely exclusively on the chemical analysis of the body, since this simply establishes the *fact* of the presence or absence of the poison, but does not necessarily disclose its *mode of introduction*. But the following points or propositions may, I think, materially aid in the elucidation of the subject:

I. A knowledge of the *symptoms* before death, where this is obtainable, will frequently throw much light on the case, although too much stress should not be placed upon symptoms merely, inasmuch as the symptoms of many diseases strongly resemble those of certain poisons. Thus, I have known several cases of fatal arsenical poisoning to have been mistaken for cholera morbus, and treated as such by the attending physicians, and the certificate of death to be so made out, but in which I subsequently detected in the viscera large amounts of arsenic.

II. The chemical examination of the urine of the deceased. As is well known, the kidneys rapidly eliminate

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arsenic (and the same is true of other mineral poisons) from the body; and it is generally possible, for the analyst to detect the poison in the urine, both before and after death. Its discovery in this secretion may, I think, be regarded as very conclusive evidence of *ante-mortem* poisoning; for, although it is true that the urinary bladder, in common with the other abdominal viscera, was found contaminated by the post-mortem imbibition of the poisonous solutions, in the experiments above detailed, yet I think it scarcely possible that the poison, would percolate through the coats of the bladder so as to affect the contained urine. The record of the experiments was simply the production of a yellow spot on the surface of this organ. Nevertheless, in a capital case where the evidence of poisoning hinged upon this particular aspect of the subject, I should not like to swear that such a thing might not be possible.

III. The finding of the poison, on the exterior of the organs, and not in their interior, is I think very positive evidence of post-mortem imbibition, since in a true *ante-mortem* case, the absorbed poison is always deposited in the interior of the organ quite as distinctly as on the outer surface.* But, practically, this is often a difficult matter to decide, especially after the lapse of a long interval of time, and where the organs have become much broken down by decomposition.

IV. The discovery of poison in the stomach after

* *Vide* Orfila, *Toxicologie*, 1852, *I.*, *p.* 63.

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death cannot be regarded as absolute proof of its ante-mortem administration, since, as we have seen, it might have been injected after death; and there is also the further *possibility* that if introduced into the intestines through the rectum, it might by imbibition penetrate even into the interior of that organ, just as in the supposed case of the urinary bladder above alluded to.

Philadelphia, July, 1887.

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TRANSACTIONS.

MEDICO-LEGAL SOCIETY.

Discussion of Mr. Whiton's Paper on "The Penal Aspects of Suicide."

(*May Meeting* 1887.)

President Clark Bell in the Chair.

Dr. S. N. Leo :—I think this is a subject which is worthy of great consideration, especially in view of the fact, that legislation inflicts a penalty in these cases. At the same time it has always been my opinion that suicides should be divided into two classes, those who are really responsible for the commission of the crime, and those who are mentally irresponsible.

We may have a father who has three or four children stricken down with disease—a wife whom he dearly loves, and in his despair he takes his life ;—we have a son who loses a parent—a wife who loses her husband, and therefore is so grief stricken that she takes her own life, and is certainly not responsible for her own act, and it is ridiculous to say that the law shall step in and inflict the same punishment on her, as on the man who is legally and technically responsible for that crime. Look among the Laws on the Statute book, there is a certain amount

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of justice and a great deal of injustice, and of course where the person succeeds in taking their own life, no punishment is necessary, but where they are often arrested in the act of taking their life, it is a very strange justice to award the same amount of punishment.

Dr. Gabriel Grant:—I think this subject for the last few years has been assuming a phase, which takes it out of the legal cold philosophical aspect, and into a domain of those who seek to find facts in the social surroundings of communities of cities and empires. I have made some observations in Germany, and in Saxony, there is no place where this disease of suicide has assumed so pathetic an aspect.

To show you how common it has become—fourteen persons committed suicide in the City of Dresden in the month of February, and they were persons, two of them in advanced life, and the balance of them were young, most of them from fifteen to thirty-five, a number of them students graduating, and you may find an average of ten every month through the year. It is a very common thing for an officer in the army who, while he wishes to commit suicide, owing to the disgrace attached to it takes another beside the ordinary way, called an American duel. An American duel is, that of a person having his honor impugned, goes to his antagonist and they draw lots, and the one to whom the lot falls kills himself. It is only another name for suicide.*

[NOTE BY THE EDITOR.—Doubtless styled an "American duel," from the fact that such a contest is wholly unknown in the American States.]

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It has become a very grave question what the facts are, leading to it, and to punish those persons who take their own lives, or rather attempting it. It is a disease, and the grave inquiry that comes to every one who studies the subject is, what is producing it?

Thus, one hears of a nobleman, unable for a time to meet his creditors, who commits suicide for shame. You read the history of Saxony and find that she has been very unfortunate in her wars, and has been until recently the losing party. The people are not always the poorest in the world, there are poorer in Norway,—it is a country that has great elements of power, it has a great deal of learning, and, I suspect strongly, it is on account of such power of learning, that has something to do with it, for if you have great machines of education, the machine should suit the people.

In the statistics that have been furnished me every week suicide has been a very prominent cause of death.

There is a marked disproportion of suicides occurring annually in different countries. While there are seventy in a million of the population in Spain, seventeen in Norway, there are between three and four hundred in several of the German states and *over four hundred in Saxony.*

Pres. Bell—How long have you had these statistics?

The last three years as far as I can recall. I am not prepared to give them now.

At certain seasons of the year suicidal mania is more prevalent than at others. I have noticed that in February more occur, it is a cold damp month.

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Pres. Bell—I would also like to ask if in cold weather, fine weather or stormy weather most occur?

Brierre de Boismont in his essay on suicide of the insane, gives statistics, of various countries, which corroborates in some respects the suggestions of Dr. Grant.

Mr. Bach—I would like to ask Dr. Grant a question. Whether he considers suicide a disease. Do you consider the man who commits or appears to commit suicide diseased?

Dr. Grant—That is a question which leads us over a vast field. I have always supposed it was a disease. It is certainly a departure from the normal condition of health.

Mr. Bach—I think, Mr. President and gentlemen, it is a matter of great importance to first determine whether a person attempting or actually committing suicide is diseased. It is important in connection with the consideration of the penal aspect of the case. If a person is suffering from a disease, and under the influence of that disease commits an act, which, if he were in a normal condition of health he would not commit, in my opinion it would be wrong to punish that person as for the commission, and in the question of life insurance it is of vital significance whether a man is in sound mind when he commits suicide or whether he is not. Our Court of Appeals has decided, apparently, that a man who commits suicide, is not a person who dies by his own hand cognizant of the fact. In other words they have substantially decided that the man is *non compos*. Insurance companies now-a-days are recognizing the force

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of the decison of the Court of Appeals on that subject, and one company notably has seen fit after three years to make its policy indestructible, whether a man commits suicide or whether he does not, whether he dies from a natural cause. Now certainly, to my mind, as Dr. Leo has remarked, it would be in itself, a crime to punish a person who attempts to do away with himself in a moment of mental aberration. Who is to decide whether a man who attempts to kill himself is insane. It is, however, well understood if a man gets an insurance on his life and purposely and wilfully commits suicide, knowing or believing that he has nothing to live for, in order to pay back an indebtedness that he has contracted, that man is guilty in my opinion of a crime, a crime against society as well as the company which he cheats out of money. But the vast number of people who are willing to end their earthly career, do not do it because they want to to cheat any body; they do not do it because by doing it they feel they can accomplish anything else, but end, what they consider, a misery that cannot be borne. I can understand a man being reduced to such a condition from abject want, from a hopelessness concerning the future, that he could calmly and deliberately kill himself. Now, to say that a man who commits suicide is necessarily out of his mind is perhaps going too far; the penal aspect of the case is one of vast importance to the community.

Mr. Moritz Ellinger—I am very grateful to the gentleman who read his paper because it furnished a history of legal

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enactments regarding suicides, which rather than legal enactments to punish sucide, were enactments intended to disgrace suicides and to create amongst people such an abhorrence of it that they would not resort to it. Suicide is not always the destiny of a useless man or a morbid man. I hold that suicide may proceed from as noble a motive as that which makes a man offer up his life voluntarily for any principle that requires such sacrifice. Man shows his highest standing in nature by showing in his action that he is capable of sacrificing that which he regards as highest of all that he possesses, in order to vindicate his principles. We know from observations such as lately have been made, that some animals intellectually gifted are capable of committing suicide from grief. It has been absolutely established that dogs who lose their masters refuse to eat and starve themselves, and some of them have drowned themselves; but to offer up your life for the salvation of your country, for the benefit that accrues to somebody else, is a quality that only man can exhibit. This may make a man offer his life. It may seem selfish, but it is higher than the common interpretation of getting rid of a burden. We know that there are men who are highly sensitive of what they call their honor, and when they are, in their sense, offended, and cannot vindicate it, that consideration so oppresses them that life loses all the value it possessed in their eyes.

In the statistics furnished something struck me as remarkable, and that was, that in the countries where the

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Catholic religion prevails to the greatest extent the number of suicides is less than where the Protestant religion prevails.

Mr. Bell—You think there is a higher average of the number of suicides in the countries that are more largely Protestant than in the countries that are Catholic?

Mr. Ellinger—I think so, and it is borne out by the paper just read. The punishment of suicide is more a matter of religion than of penal enactment, because religion furnishes the bridge which connects the mortal with the immortal, the present with the hereafter. The more you impress a man that he is responsible in the hereafter if he commits a crime, which he shall not answer alone to man for, the more unwilling he is to do it.

The Catholic religion is the only religion that refuses burial to suicides on consecrated ground; it insists that they shall be buried outside the pale of the Church, and there is no greater hardship for a religious Catholic. This prevents suicides from becoming more common; they are afraid of the hereafter. Burial in consecrated ground means being received in the assemblage of those who belong to the church; it is the all and all, to them, and being buried in unconsecrated ground is expulsion from that Church, an expulsion that extends to an eternity, which for every Catholic is horrible to contemplate. The number is thus far less, in Catholic countries, than where the Protestant religion prevails. The fact is, that suicide is increasing wonderfully of late years, and I think it owes its increase somewhat to the advance of free thought and

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philosophical reasoning. A man who has nothing to expect from the world to come, but who seeks all his achievements and enjoyments in this world, when mishaps occur there arises the question, why does he not get out of this world? Then he simply throws away his life; the world to come has no interest for him and it has no horrors.

There have never been so many suicides as in modern times. If you will run over the number of statistics of the suicides in this country, you will find that it consists very largely of emigrants, or the people who have emigrated to this country and have remained here two, three, or four years and fail of success. The foreigner is much more easily depressed; he has no home surroundings and he becomes more despondent than he would were he still in the country of his nativity, and therefore he commits suicide more readily.

Time will not admit of discussing this subject as it deserves. It must, however, be discussed from its mental, its physical, and from its moral standpoint, and from the conditions surrounding suicides which even Mr. Buckle did not regard. According to Mr. Buckle the average of suicides, within ten years, seems to vary very little, and what is more wonderful yet, is the fact that the number of weapons, the number of methods in which the suicide takes his life remains the same. I do not know that any one except Mr. Buckle has followed the statistics on which he bases his opinion.

I feel, however, inclined to say that the number of sui-

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cides of late have vastly increased,—that the suicides are not all recruited from the lowly nor from the poorest stations of life. We have had a Rothschild commit suicide, and lately had instances in this country, of the sons of men who occupied high financial and social positions in this world,—so that there is some strange motor behind these acts of self destruction, and the man who undertakes to study this subject has a vast field before him. Taking the ground work which has been so ably covered by our friend, I think we will be able, most probably at some future meeting to have a paper in which this discussion is more fully entered into in its physical aspect.

Pres. Clark Bell.—I think great lessons are to be learned from statistics, and in a paper which I read before this Society some years ago, entitled "Suicide and Legislation," I attempted to show the value of statistics upon these questions. We should not allow anything to be quoted as statistics, which is not fully, however, and properly entitled to be regarded as such. The death rate of every city is kept and published every week. The vital statistician keeps the numeration of it throughout all counties. The United States census of 1880 was the only basis I had then to go upon for the United States of America, and the French, Italian and English writers, who gave authoritative tables, such as Brierre de Boismont, Morselli and others. Dr. Nagle has given valuable information on the subject each year, so far as the City of New York goes, and the statistics of each county throw

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the clearest possible light upon the problems surrounding the question.

The old Greek and the pagan philosophers held, that any man had the lawful, moral, and the inherent right to take his own life; first, in defence of his honor or that of his family; second, to prevent thereby great scandal or disgrace coming upon him, or those whom he loved; and third, whenever life ceased to be worth the candle, when it was no longer desirable, as for example a man afflicted by an incurable disease,—leprosy—anything that might make life such a burden to himself and friends as to make it undesirable to retain it.

Among the ancients, it was regarded as noble for the great soldier, when defeated, to fall on his sword rather than be taken into captivity. In more modern times laws have forbidden and punished suicide, as does our penal statute, but these laws do not serve to diminish suicide, as statistics demonstrate, to which allusions have been made by Dr. Grant and the Modern writers, of which, perhaps, the greatest of all living is Morselli, whose recent contributions to this subject have been far the ablest of the present century, give great light upon this singularly interesting subject.

I consider that the paper of the evening suggests some subjects of medico-legal interest, where attempted suicide is involved, in mental disturbances, as to how far insane persons, or persons afflicted with unsound minds can be held responsible for murder, or for any other crime committed, or attempted on themselves or others.

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The question of peculiar interest is that question of Medico-Legal significance, which has arisen particularly in cases of life insurances, and sometimes in determining whether death is due to other causes than suicide. A man's life is insured, as in the celebrated case of Dwight at Binghampton, N. Y., which excited the attention of the whole legal and medical world, as well as the life insurance companies, it has been tried in the courts, and we now hear has been recently compromised. There is a very interesting case on the *tapis* in Norwich, Conn.; that of Tyler. I think of one occurring recently in France, the report of which was made by Brouardel, the great French chemist, who examined the body to see whether the remains found in a ditch were that of a suicide or of one who had been murdered; whether that body, from the appearance it presented in the cadaver, was alive and drowned, or whether death had occured before the body was put into the ditch. I have in my mind an actual number of cases presenting interesting questions—the celebrated case in Connecticut, spoken of as the Malley case, of which Prof. Chittenden made the analysis, and contributed a paper to this Society. The question which frequently arises of a Medico-Legal character is, whether a given case is suicide or not, whether it is due to natural causes or of poison or other unnatural causes. This aspect of the case is very important in speaking of the penal aspect of suicide. It is due to communities that these questions should be investigated by the coroners or proper officials.

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I think Mr. Whiton's paper on this subject is a valuable contribution indeed. I shall invite him to close the discussion of this very interesting question, for the present, and to discuss it in a wider sense at some future date.

Mr. Whiton.—There are a few thoughts, gentlemen, which I would like to suggest, in addition to those that have been suggested by my paper and its discussion. Some references have been made to the increase of suicides in Germany, and it has also been suggested that suicides have increased in all parts of the world. It is a very remarkable fact that the number of suicides to-day, is greatly in excess of those of ten years ago, and still more so of those of thirty and forty years ago. Another curious fact has been shown in regard to suicides. The tendency of life insurance decisions is to hold that nearly all suicides are the results of mental aberration, while the man was not cognizant of the crime he was committing, and if the judges have not so held, the juries have nearly always so decided against the insurance companies. A great many insurance companies are striking out all reference to suicide from their policies and applications, while on the other hand, others, in order to protect themselves, are making their policies stronger, by stating that they will not pay the same in case of suicide, whether sane or insane, and such a contract has been held by the courts to be valid. In the companies that have stricken out of their policies all reference to suicide, the number of their poli-

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cies has increased, thereby showing inferentially that men have deliberately obtained life insurance policies, in order to defraud the companies. Notice the Dwight case, also that of Tyler, who died last fall in the town of Norwalk, whose body my friend Dr. Burke, now here, was the first one to see after death. Here was a man that within the space of six months applied for an aggregate sum of $400,000 of insurance on his life. He was a man of magnificent physique, six feet tall, forty-two years of age, and belonged to one of the most aristocratic families in Boston; a man, who in the last fifteen years had spent a good sized fortune in money furnished by his mother. A man of the world, a schemer, and a man who was always about with men of doubtful character, a man of no moral stamina, who did not hesitate at any act to get money; who associated himself with men who had been or ought to be in States prison. This man finds himself stranded, in his appeals to his family for money; he fails in his appeal to his brother; he then announces his intention to place a large amount on his life and kill himself. He offers policies to his friends and goes to one and tells him that he is going to do this, and that if he will permit him, that he will place a $10,000 policy to his credit. His friend, notwithstanding the fact that he was under indictment for one crime, hesitated. He placed these policies with the avowed intention of leaving the "boys" happy, as his so-called creditors were termed—peculiar creditors if we look to the facts of the

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case, for these creditors, with one or two exceptions were supported by this same Jack Tyler.

So he placed in the month of December $100,000 on his life, and in the months of April, May, June, 1886, he again placed another $100,000 upon his life; for the payment of the premiums on which, strange to relate, the so-called creditors had been supplying him with money. In the applications for these policies he stated that he had not more than $5,000 or $10,000 on his life.

The Citizens' Mutual, a Company which I represent, had two parties, one of whom was not a beneficiary, rush to the Company to pay the premium upon the policy of their friend Jack, only four days before he committed suicide. When it was learned that his premium was in arrears Tyler come into the Company at once and made a warranty of health, although at that moment he was suffering with an acute attack of neuralgia. He then wrote a letter to his dear mother, as he begins it, telling her it was his deliberate purpose to take his life. He then goes down to Philadelphia and communicates with a friend, that he intends to take his life there under the name of Allen. Goes to South Norwalk and telegraphs to a friend under the same name; and is found in the morning dead. He left a memorandum on his table, but I believe that the memorandum of a man under the influence of morphine is as reliable as that of a chronic liar. There was convincing evidence that he took an overdose of morphine.

The majority of the companies are defending their

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cases upon various grounds. Not only on this ground alone is payment of the policy refused, but the insurance companies expect to prove the charge of conspiracy.

Now, in regard to suicide, in its relation to Protestantism and Roman Catholicism, I do not think that question has anything to do with it. There is a belt of country where suicides are more apt to be committed ; more especially in 45 to 55 degrees north latitude. It seems to be that belt of country where the temperature of the world is about such as it is in New York, within the isothermal line. Dr. O'Dea in his interesting work has sought to account for the fact of the great number of suicides occuring in this belt, by the theory that it is a line of the greatest nervous activity. In warmer climes there is very little of the nervous vigor that there is in the North. Among the class that exercise, that have nervous vigor, suicides principally occur. Now it is undoudtedly true that suicides increase as morality decreases; I will not draw the deduction that immorality is apparently increasing. At the time of the French Revolution there was a wild epidemic of suicides; some now are discussing whether today we are not approaching a like reign of terror as in France unless the questions which are convulsing the world are settled and solved in some satisfactory way. It is undoubtedly true that a great cause is as suggested by my friend Mr. Ellinger, the fact of emigrants coming here, growing desperate and taking their lives. Now in regard to the penal statute—a word ; that has been attacked tonight on the ground that it draws no distinction between

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an insane man and a sane man ! if a man is insane at the time he is not punishable.

That distinction has been drawn from time immemorial, and at the same time the consensus of opinion to-day is that a man should be punished for attempting the crime of suicide, if he be sane, whether he have a motive that is sufficient in the eyes of many moralists in this world or not.

Now, in regard to the prevention of suicide. Penal legislation has very little effect, but I won't admit for one moment that fear of the temporal church will deter a man from the act, but I claim that the cultivation of moral views will do much to counteract the epidemic of suicide.

JUNE SESSION.

PRESIDENT CLARK BELL, Esq., IN THE CHAIR.

JUNE 8, 1886.—President Clark Bell in the Chair. Regular meeting of the Medico-Society at Hotel Buckingham. Minutes of the May meeting were read and approved.

The following persons, proposed by Clark Bell, Esq., were elected on reccommedation of the Executive Committee.

Active Members.

WM. J. BEST, Esq., of N. Y., Dr. ELIZA M. MOSHER, Dr. LUCY. M. HALL of Brooklyn, Col. ROBERT G. INGERSOLL, and Dr. J. V. Stanton, of N. Y.

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Corresponding Members.

CHAS. W. MOORE, M. D., San Francisco, Cal.

Dr. GUGLIO CHIARUGI, Member of the Institute of Anatomy, Siena, Italy.

ENRICO TORRINI, Siena, Italy.

W. H. S. BELL, Esq., Editor Cape Law Journal, Grahamstown, Cape Good Hope, South Africa.

EDWARD NETTERVILLE BLAKE, Esq., Editor Irish Law Times, Dublin Ireland.

JOHN KINMOT, President Scots Law Society, Edinburgh, Scotland.

Dr. CHAS. F. STILLMAN, proposed as active member.

Dr. GEO. D. CLIFT, of N. Y.

Proposed by Dr. ISAAC LEWIS PEET, Dr. STEPHEN CUTTER, of N. Y. as an active member.

Proposed by Dr. F. C. VALENTINE as corresponding member, Dr. JOSE MONTEROS, of Monteros, Guatemala.

The first paper of the evening entitled "*The Mental and Physical Capacity of Man in the Rapid Expression. Receiving and Recording of Language,*" by R. S. GUERNSY, Esq., of N. Y.

The paper was read at the author's request by CLARK BELL, who called Ex-President JACOB F. MILLER, to the chair.

The paper was discussed by Dr. ISAAC LEWIS PEET, DR. WM. F. HOLCOMBE, Judge J. BURDETTE HYATT, President BELL, C. W. TYSON, Esq., of the reportorial staff of the New York Tribune, Dr. FRANK L. INGRAM, Mr. ALBERT BACH and others.

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Dr. IRA RUSSELL of Winchenden, Mass., read a paper entitled *Opium Inebriety*, which was discussed by Drs. CHARLES FRISBIE, Dr. FRANK L. INGRAM, JACOB F. MILLER, Esq., and others.

The announcement of the inauguration of the statue to Guislain by the Society of Mental Medicine of Belgium in July next and an invitation to be represesnted by this society was read.

Mr. CLARK BELL was chosen delegate and authority given him as President to designate others of our active or corresponding members or others to represent the society on the occasion.

President Bell announced that Elliott F. Shepard, Esq., had contributed $100 to the fund for a prize essay on a Medico-Legal subject, but the programme would not be completed by the Executive Committee in time for the June issue of the Journal, but would be announced later.

The Society adjourned.

ALBERT BACH,
Secretary.

A regular meeting of the Medico-Legal Society was held Wednesday, September 14, 1887, at the Hotel Buckingham.

President Clark Bell in the chair

The minutes of the June, 1887, meeting, were read and approved as read.

On motion duly made and carried, the following gen-

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tlemen recommended by the Executive Committee, and proposed by President Clark Bell were duly elected active and corresponding members respectively—

Active Members.

Dr. JOHN E. ALLEN, of New York City.

Rev. WILLIAM TUCKER, D.D., Mt. Gilead, Ohio.

JOHN S. BUTLER, M.D., Hartford, Conn.

Corresponding Members.

SCOTT HELM, M.D., Secretary Medico-Legal Society of Chicago.

EDWARD J. DOERNING, M.D., President Chicago Medico-Legal Society.

A. K. STEELE, M.D., Chicago. Ex-President Medico-Legal Society of Chicago.

EMILE HOURTELOUP, Avocat., President Medico-Legal Society of France.

Dr. FALRET, Supt. Asile de la Salpetriere, Paris.

Dr. V. MAGNAN, Asile de St. Anne, Paris.

Prof. Dr. LEFEBVRE, Brussels, Belgium.

Dr. VERMELULEN, Asile pour femmes, Ghent, Belgium.

The papers of the evening were read, viz.:

"The relation of Intemperance to Insanity." By CLARK BELL, ESQ.

"The Imbibition of Poisons." By PROF. JOHN J. REESE.

The papers were discussed.

President Bell announced the death of Dr. Augustin Andrade of Mexico, and paid a tribute to the distinguished services of this corresponding member.

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PRESIDENT BELL also announced the death of Judge Guy H. MCMASTER of Bath, N. Y. Judge McMaster was at the time of his death Surrogate of Steuben County. President Bell spoke feelingly of the life and character of his former partner and business associate. He said: Judge Guy Humphrey McMaster, of Bath, Steuben County, New York, was born January 31, 1829, at Clyde, New York, and was the elder son of Hon. David McMaster, ex-Judge of Steuben County. He graduated at Hamilton College at the early age of eighteen years, in the same class with Senator Joseph R. Hawley Charles Dudley Warner of Connecticut, and Col. Emmons Clark of this city.

He was tutor at Franklin Academy, Prattsburgh, New York, and the editor of the Medico-Legal Journal was in his Latin Class and class in Geometry. Admitted to the bar in 1852, he shortly became junior member of the firm of Campbell & McMaster, and when Gov. Campbell retired formed a law partnership with myself as "McMaster & Bell," which continued some years at Bath, New York.

In 1863 he was elected Judge and Surrogate of Steuben. County, an office which he held for twenty years. When the Surrogate and Judgeship were separated he was elected Surrogate, and held that office to the day of his death.

Judge McMaster was held in high estimation in Western New York and none stood higher in public estimation. He was in the front rank, of the bar of the Seventh District.

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For many years he has been a corresponding member of this society, and took a profound interest in its success, and in medical jurisprudence generally. A true friend, an honest and conscientious man, his death comes upon me like a blow, and I feel sure it will fall as heavily on many hearts who have known and loved him in Steuben County. Aside from his legal, literary and scholastic attainments, Judge McMaster was a thorough student and lover of music and an excellent musician, and, he was regarded by competent critics as a poet of no ordinary ability. We cannot speak here in detail of his varied poetic effusions, save to say that his CARMEN BELLICOSUM has that ring which will be and ever has been recognized as the soul of poetry. I trust that I may be excused, as I stand at the open grave of the friend of my whole life, filled with profound emotion at a loss, which to me seems irreparable, if I drop upon his bier (as he died but yesterday) that song on which fame will award him the high trbute of inspired verse, his

CARMEN BELLICOSUM.

GUY H. MC MASTER.

In their ragged regimentals
Stood the old Continentals,
Yielding not,
While the grenadiers were lunging,
And like hail fell the plunging
Cannon-shot;
When the files
Of the isles,
From the smoky night-encampment, bore the banner of the rampant
Unicorn;
And grummer, grummer, grummer rolled the roll of the drummer,
Through the morn!

Then with eyes to the front, all,
And with guns horizontal,
Stood our sires;
While the balls whistled deadly
And in streams flashing redly
Blazed the fires;
As the roar
On the shore
Swept the strong battle-breakers o'er the green sodded acres
Of the plain;
And louder, louder, louder cracked the black gunpowder,
Cracking amain!

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Now like Smiths at their forges
Worked the red St. George's
Cannoneers;
And the villainous saltpeter
Rang a fierce, discordant metre
Round our ears,
As the swift
Storm-drift,
With hot sweeping anger, came the
horse guards' clangor
On our flanks.
Then higher, higher, higher, burned the
old-fashioned fire
Through the ranks!

Then the bare-headed Colonel
Galloped through the white infer-
Powder-cloud; [nal
And his broadsword was swinging,
And his brazen throat was ringing
Trumpet-loud;
Then the blue
Bullets flew,
And the trooper-jackets redden at the
touch of the leaden
Rifle-breath;
And rounder, rounder, rounder, roared
the iron six-pounder,
Hurling death!

On motion the Society adjourned.

ALBERT BACH, *Secretary.*

BRITISH MEDICO-PSYCHOLOGICAL ASSOCIATION.—The July meeting was held in London on Wednesday, July 28th, 1887.

Dr. Raynor, the Retiring President, in the chair. After the routine business, the President-elect, Dr. Needham, was introduced, who gave as his inaugural address a very able paper reviewing and assailing the pending Lunacy Bill as favored by the Government in several respects, but especially as to the proposed changes requiring a judge or magistrate's order preliminary to commitments.

The paper was received with great favor by the meeting which was largely attended by some of the more prominent of the English and Scotch alienists.

DR. HENRY MAUDSLY spoke eloquently and with much feeling, assailing what he regarded as objectionable features of proposed changes in the English Lunacy Statutes,

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particularizing the section regarding commitments on judges' orders, and the proposed legislation as a whole was characterized as a "lawyer's bill."

Other members spoke who held similar views.

MR. CLARK BELL, President of the Medico-Legal Society of New York, was present by invitation, and on being called upon to speak, defended some of the features of the Bill proposed by the ministry, and particularly those sections which President Needham and Dr. Maudsly had so vigorously assailed.

He cited the working of similar clauses in the laws of many of the American States, and thought such changes would be found to work well in practical use, if adopted in England.

He praised the present English Lunacy Statutes taken as a whole, especially in contrast with those of New York and many American States, and cautioned Englishmen of the danger of injury to their present admirable system, by hastily or carelessly adopting changes, which he thought would be as likely to imperil real and essential ground, now secure under English law, such as supervision by a Board of Lunacy Commissioners, with ample powers, thorough supervision and personal inspection of Insane by officials with power to redress injuries and prevent and reform abuses, which we hoped to secure in America.

He gave a brief resume of the successful amendments secured in Pennsylvania and the commendable course of ex-Governor Hoyt in effecting this result.

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The meeting elected DR. CLOUSTON as its President-elect to succeed Dr. Needham next year.

The session was followed by the annual banquet at the "SHIP" at GREEWICH, where the *menu* was that made famous as the "white bait" dinner, given usually at the English Ministerial Banquet.

There was a large attendance. Mr. Bell was present at this banquet and spoke. The affair was a very enjoyable as well as a most interesting occasion.

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EDITORIAL.

DEFINITIONS OF INSANITY—TESTS OF RESPONSIBILITY FOR INSANE.—We continue the publication of our replies, to the interrogatories received from Alienists, Publicists and others, to the subjoined letter, and some of the definitions we have collected otherwise, and would be glad to receive answers from our readers or others who take an interest in the subject to the subjoined queries. We report the queries:

MEDICO-LEGAL JOURNAL ASSOCIATION,
Office of the Editor,
No. 57 Broadway,
NEW YORK, 1887.

DEAR SIR:

Please give me your idea of the best definition of insanity under our present knowledge of that subject.

Also what in your judgment should be the legal test of criminal responsibility for acts committed by persons suffering from any form of mental disease. I am making a study of these topics, and would feel greatly obliged for your views.

Very faithfully yours,
CLARK BELL.

T. D. CROTHERS, M. D., writes:

"The best definition of Insanity is: that it is a disease of the brain, manifest by disorder of the mind."

"The best legal test of criminal responsibility, is his knowledge of right and wrong, and capacity to adopt himself to these facts. This can only be ascertained by an exhaustive study of the man, his conduct and thoughts and life work."

A. F. KEENER, A. M., M. D., writes:

To your first question I would answer.

"Derangement of the intellect, the mind or the understanding."

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To the second question, "I would not be able to answer in general terms. *Each case* must be decided on its merits—a thousand things, almost, might be suggested, yet each case must be decided for itself. It is often a difficult problem, even with the case and all the facts at hand."

J. D. ROBERTS, M. D.:

"The question in cases of alleged insanity should be: was the action the result of a brain—diseased in such a manner as to interfere with function? Or as it has been stated. How has *disease* distorted the normal relationship of the man to the crime and surroundings."

J. A. WRIGHT, M. D., Supt. N. W. Ohio Hospital for Insane:

"I trust you will hold me excused for not sending you a satisfactory definition of Insanity. There are so many definitions by such a multitude of alienists that the student of mental science cannot fail to be confused in attempting to make a satisfactory selection. Your other query admits of a better answer. I hold that no deed is criminal if the individual who perpetrates it is incapable of controlling his own conduct, unless the power of self-control has been lost through his own fault."

DR. FRED. H. WINES, Secretary of Illinois State Board of Charities, writes as follows:

I have never seen a satisfactory definition of insanity, and do not believe that there is one in existence. It is a physical disease, and its seat is the brain, but except where its ravages are revealed by dissection and microscopic examination after death, its nature is unknown. The theory that lesions always exist appears to be, like the molecular theory, a matter of inference and imagination. There certainly appears to be such a thing as purely functional derangement of the brain. Practically, we know insanity by its manifestations, and it is impossible to catalogue these or include them all under any one category or series of categories, in such a way as to exclude similar manifestations noted in people who are undoubtedly sane. Some of the external symptoms of madness are physical, others psychical. Much stress is laid by alienists on the alteration of character and conduct noticeable in the individual; he is not what he was, and he usually frames some extravagant theory, unsupported by facts, to account for the change of which he is conscious, but whose real nature is unintellgible to him. There is no absolute test of insanity in doubtful cases, and, that being true, there can be no absolute test of criminal responsibility. We *guess* and act according to the best judgment that we can form. But I do not hold to the old test, laid down by the English judges, that if a man knows the difference between right and wrong, and knows that the act committed by him

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is wrong, at the moment when he commits it, he is of necessity responsible to the law. I believe that a man may know that he is committing a wrong, and be driven to it by an irresistible impulse, arising from mental derangement. All depends on what we mean by "wrong" and by "irresistible;" and these are terms concerning which no end of metaphysical hair-splitting may be indulged in.

Unsatisfactory, I know, this must be to you, as it is to me. But I hope that you may be able to teach me better.

JOAQUIN G. LEBREDO, M. D., Havana, Cuba. Corresponding Member of the Medico-Legal Society of New York, writes us a pleasant letter from which the following extracts are made, translated by our worthy member and associate editor, DR. A. M. FERNANDEZ:

If I were to follow my best inspirations my answer would be very simple. I would say the problem is impossible to solve, as far as the first question is concerned, if the answer is to fulfill all the requirements of a good definition. In regard to the question of the legal test of criminal responsibility of the insane, I would say that it is very difficult, if not impossible, to fix the circumstances necessary to determine in each and every case that criminal responsibility. I form such a discouraging opinion because among the many reasons that could be brought to support it, there are, in my estimation, three principal ones:

1st. That etymologically or ideologically speaking, the word *insanity* is a *negative abstraction*, and, with every negative term, it is impossible to realize its true significance because we do not possess that exact and definite knowledge of the objective reality which we can represent by any positive terms. Besides, it is evident and in conformity with what I have before said, that in order to define *insanity* it is indispensable to know thoroughly what *sanity* is, and I fancy it is not necessary to make great efforts to demonstrate that in spite of the immense progress realized in the organic and functional study of the nervous system, and especially of the cerebrum, we are yet far, very far from being able to fix and determine—inside the physiological limits—what constitutes psychical life and the essentially fundamental characteristics of sanity.

2d. This to a certain extent is comprehended in the first reason, and is founded in the impossibility of drawing a line between sanity and insanity, thus giving rise to the fact that though it is very easy to differentiate those two states of the mind when manifested by their most marked characteristics, it is extremely difficult and sometimes impossible to distinguish each, when both touch that mobile and vague zone that separates them.

3d. This reason is based on the extensive generalization which is indis-

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pensable to a true understanding of the word insanity or its correlative sanity. It is not enough to define them in relation to that group of individuals who act inside the limits of a normal psychical evolution, or to those who more or less approximate that standard; it is necessary that the definition should reach all beings capable of reasoning, no matter to what degree of accuracy—from the lowest in the scale of civilization to the highest—and to be able to adapt it to the biological medium in general, and more especially to the sociological order in which each group realizes its respective psychological evolution.

Your second question is intimately allied to the considerations I have just expressed, and more particularly to the last one, for it is necessary to have a profound and detailed knowledge of many and very divers factors, among which it is an important one, the special legislation attached to every sociological group in its respective evolution; hence the logic of the conclusion arrived at is, that great obstacles have to be encountered in attempting to fix what the legal proof of the responsibility of the insane is to be.

Having established these premises, it will be easy for you, my eminent colleague, to form an idea of how far it must have been from my mind—putting aside the convictions I have of the weakness of my intellectual forces and the scarcity of my scientific resources—the presumption of finding and giving to you a proper solution respecting the questions you have had the kindness to submit to my judgment. As I am, however, intimately persuaded that in addressing me your communication, the ideas involved in the foregoing lines, did not escape your learned mind and, besides, as I am satisfied that the study of the subject once made by you to which your comunication refers, will be highly beneficial and interesting, both in a scientific and a practical point of view, and certainly without the deficiencies and obscurities and even errors that my expressions perhaps contain, I therefore have dared formulate my opinion on those questions you put me in the following manner, based on the ideas already given:

"*Sanity of mind* is that physiological state of the cerebrum that determines every rational being, individually or collectively considered, its conscientious and unconscientious psychical functions, and of the acts performed thereby, in which general manifestations the natural biological laws and the psychical character of each social group are revealed."

Insanity, therefore, is the partial or total deviation, constant or periodical, as revealed in one or several ways, the individual being absolutely or relatively unconscious of it. We ignore the organic lesions in which it originates, and only judge by the psychical acts to which they give external evidence."

And consequently the *criminal responsibility of the insane* will be originated

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from the moment it was clearly demonstrated there was not unconsciousness of the criminality of the act, or that having existed consciousness there was no false appreciation of the motive that impelled the individual to commit the act, nor had he an evident aberration in the conception of the idea or in the ratiocination which followed it. The grave and minute study, particularly from the psychical point of view, of all the circumstances, without forgetting heredity, which led to the act committed or attempted, the absence in some cases of logical relation between the act and its motive, the knowledge of the legislation of the social group to which it belongs—all these facts furnish, when put together, the justifiable elements of the legal construction whether there was or not unconsciousness, false appreciation of the motive, or aberration of mind which are the fundamental basis of irresponsibility."

Any way, my respected confrére, whatever be your opinion of the ideas manifested in these lines, please do not look upon them but as evidence of my desire to comply with your request, and once more please accept my high estimation of you, and remain, sir.

MRS. M. E. BERRY, Secretary of the Society for Ameliorating the condition of the Insane, replies as follows:

"I consider myself honored by your request for my opinions on these points, but I must confess that in the present state of knowledge regarding insanity, I find it difficult to give adequate replies to your questions.

Insanity cannot be so defined by any one set of words as to apply to all the insane. Simply, it is a state of mental unsoundness. Any definition beyond that must enter into a realm of technicalities in which even our foremost alienists find different definitions.

As to criminal responsibility of the insane, I do not believe it possible to find a basis for any legal test which will serve for all cases. Every person's brain and individuality differs from the brain and individuality of every other human being, and each must be adjudged by its own nature and individual necessities.

Segregation of the insane should be the pivot on which should rest all treatment of the insane. The prognosis, diagnosis, medical and general treatment, penal vicissitudes, responsibilities, and varying conditions of mental sufferers, all rest on individualities that require careful discriminations by those in charge of these diseased persons.

I am not sure but all criminals are more or less insane, especially all who have had good Christian training, and have been taught good from evil. They first become mentally and morally diseased, and then crime naturally follows. Whether such criminals are responsible or not, they must be kept

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in such custody as will insure the safety of others, but no vindictive suffering should be inflicted on them.

When physicians in general practice take up this subject, and lift it out of the narrow sphere of a few interested experts, we may hope for more light on this important question.

An EX-GOVERNOR of Massachusetts, whom we also regard as one of the *ablest of the criminal lawyers of the American Bar*, gives us the following reply, but does not give us permission to publish his name:

BOSTON, December 20, 1886.

MY DEAR MR. BELL:—One cannot, in going over a large mail to answer the current letters of the day, make a proper answer to questions of such involution as you say you are making a study of. If there is one thing more perilous than another it is a definition, but I will comply with your request upon the pledge that my definitions are not to be published as mine.

Let me premise: I do not like the term "insanity," because that means only unhealthy, unsound. Now, a man's mental condition may be perfectly healthy and yet be what is termed insane, and not responsible for his acts. One would not say that a machine was unsound when it worked perfectly, because it had been set running the wrong way. Therefore, I prefer, as a generic term, a very old and unphilosophical one, because it proceeds from the popular superstition or belief that that condition of mind has been brought on by the influence of the moon (and there again I think those minds that believe so are set running the wrong way, but I should not say that they were unsound), the word *lunatic*. By that term I should describe one, the operations of whose mind cause convictions or beliefs upon which a person honestly acts of either his moral, mental or physical state which are opposed to well-known laws accepted and made the foundation of action of the whole community in which the individual lives.

As to the second question, I should say one was not criminally responsible for any acts done when he fairly believes that it is an act which ought to be done, unless the state of mind which governs his action has been induced by his own immediate and voluntary act when his mind is in a normal condition, which brings him into that mental condition. To explain the latter part of this definition, I will take, for example, drunkenness. Where a man commits a crime while drunk, it is for the safety of the community that he should be held guilty, because of the *causa causans*, which is his own act; but not when he is in a state of delirium tremens, which is a secondary stage of drunkenness. He has then passed any possible condition of responsibility. I could illustrate this definition with very many cases, but your learning will easily supply them. I will only give you one covering the first part of the proposition. Freeman, who lived on Cape Cod,

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was an examplary, light-minded husband, father and citizen, doing everything that was proper in such relations. But intense study of Genesis and the New Testament had so affected his mind that he honestly and actually believed that it was his duty to sacrifice his best beloved son to God, as Abraham was about to do with Isaac, believing that if it was not his duty so to do, God would interfere with the act, or resurrect the child on the third day. He did the act and waited with impatience for the third day. He was found not guilty by reason of insanity. But his mind was sound enough and healthy enough though he was a lunatic within my definition.

LORD HARDWICKE:

"There are various degrees of weakness and strength of mind from various causes. There may be a weakness of mind that may render a man incapable of governing himself from violence of passion, and from vice and extravagances, and yet not sufficient under the rule of law and the constitution of this country to direct a commission."

(Banseley (*ex parte*), 3 Atk., 168.)

In Lord Donegal's case LORD HARDWICKE said:

"An idiot was such as was so *ex nativitate*, and therefore the court of common law held, that finding a man an idiot for so many years past was good; for finding him idiot was including that he was such from his nativity, and the rest was mere surplusage."

"Lunacy is a distemper occasioned either by disorders or accidents; and to one of these two cases were commissions at first confined, but in some time the part of the prerogative was enlarged and extended to one who is *non compos mentis;* but here it stopped, and this, at least, this court insists must be found to entitle any one to a commission."

(Lord Donegal's Case, 2 Ves., Sr., 407.)

CHANCELLOR KENT:

In the leading case of RIDGWAY vs. DARWIN, Chancellor Kent construed this branch of the law as follows:

"It is evident that ——— (the subject of this inquisition) is not a lunatic within the legal meaning of the term. He is not a person who sometimes has understanding and sometimes not. He is rather of that class of persons described by Lord Coke as '*non compos mentis*,' who have lost their memory and understanding by sickness, grief, or other accident. The difficulty which has arisen with me is as to the extent of my jurisdiction. Mere imbecility of mind, not amounting to idiocy or lunacy, has not until very lately been considered in the English Court of Chancery as sufficient to interfere in the liberty of the subject over his person or property. I have

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not met with a case prior to our revolution which has gone so far. Lord Hardwicke disclaimed any jurisdiction over the case of mere weakness of mind; yet it is certain that when a person becomes mentally disabled, from whatever cause the disability may arise, whether from sickness, vice, casualty or old age, he is equally a fit and necessary object of guardianship and protection. I should imperfectly discharge my trust if I crippled the jurisdiction of this court by confining it to the strict common law writ of lunacy."

(Ridgway vs. Darwin, 8 Vesey, 65.)

LORD COKE, in the case of BEVERLY, defined what he classified and called "the four manners of *non compos mentis*" as follows:

1. Idiot or fool.
2. He who was of good and sound memory, and by the visitation of God has lost it.
3. Lunatics, who have lucid intervals and sometimes is of good and sound memory and sometimes '*non compos mentis.*'
4. By his own act as a drunkard."

(Beverly Case, 4 Co., 124.)

SIR JOHN NICOL:

"It may be safely assumed that madness subsists in every variety of shape and degree. It subsists in the maniac chained to his floor. * * * In the patient afflicted with mental aberration on certain subjects, or on a certain subject only; and in respect of such even, never betraying itself in violence or outrage. The affliction is the same in both cases; in species, the difference is only in degree."

(Dew vs. Clark, 3 Add., 79–87.)

HENRY F. BUSWELL:

"The common law recognized four specific forms of insanity, namely: lunacy, idiocy, accidental loss of understanding, and deprivation of understanding by the subject's voluntary act."

(Buswell on Insanity.)

"The English and American courts, in a long series of decisions, established the rule, that the true criterion of the presence or absence of insanity in any case was the presence or absence of delusion in the mind of the subject." (Ibid., p. 16.)

This test is to be accepted as the correct one, except that "since the modern law includes in the term 'insanity' all forms of mental disease, however arising, as well as those included under the ancient definitions of

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idiocy or dementia, as those falling within the technical definition of lunacy, it follows, that although formerly insanity was never held to be established in any case, when delusion had not at some time prevailed, there exists a class of cases in which delusion is not the criterion of the existence of insanity."

Such cases are those in which there has existed, *ex nativitate*, such general weakness of intellect as to render the subject unreasoning and irresponsible, and those in which the mind has become weakened and disorganized, either from the occurrence of disease or the gradual growth of senile dementia.

"In such cases the patient cannot be said properly to be the subject of delusion, since ordinarily he has not sufficient mental power to form any conceptions, true or false, of the relations and sequences of facts and circumstances."

(Buswell on Insanity, pp. 20, 21.)

"Mere beliefs, opinions or prejudices, unless these necessarily involve the existence in the mind of their subject of some delusion as to fact, are not evidence of insanity.

"The same rule is applied to opinions in relation to the *moral quality* of acts; that is to say, no perversion of the moral nature, or mere disorder of the moral affections and propensities, unless accompanied by such delusion as indicates the subversion of the will and reason, is to be regarded as constituting insanity in law."

(Buswell on Insanity, p. 13, §10.)

"The following rules may be laid down as applied by the law of the present day in defining legal insanity:

1. The words 'lunatic,' 'insane' and '*non compos mentis*' are generally convertible and generic terms, and include all the specific forms of mental disease recognized by the text writers and medical authorities. And he is insane, lunatic or *non compos mentis* whose mind is affected by general fatuity, or is subject to one or more specific delusions.

2. Insane delusions consists generally in such an hallucination or false conception in regard to facts or objects as cannot fairly be supposed to exist in a healthy mind, and of which the subject cannot be disabused by reason or argument.

3. When the issue is upon the abstract question of the party's sanity, as in proceedings to place his person and property, for protection, within the custody of the law, it must appear, in order to authorize such protection, that the party is, by reason of mental disease, unfit to be intrusted safely with the control of his person or property.

4. When the issue arises collaterally—that is, upon the determination of the quality of the party's civil act, as being valid or invalid, or of his unlawful act, as being innocent or criminal—the question is whether, by reasons

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of mental disease, the party was unable to comprehend the nature of the lact, its relations, effects and legal consequences."

(Buswell on Insanity, pp. 23, 24, §18.)

"In former times the law was inclined to regard the human mind as an integer, and to hold that if the subject were lunatic, he was alike incapable of performing civil acts, or of being affected with criminal responsibility. So that it was held, that in order to excuse his unlawful acts, the subject must be totally deprived of his understanding and his memory, and SIR MATTHEW HALE laid down the arbitrary rule, that one who had ordinarily such understanding as a child of fourteen years has, might be guilty of treason or felony. But the law of the present day recognizes the principle, that the capacity or responsibility of the subject, in respect of any act civil or criminal, is to be ascertained only by inquiring, whether by reason of the existence of mental disease, the doer of the act was unable reasonably to comprehend its nature, relations, effects and legal consequences." (Ibid; Preface.)

"The delusions which indicate such insanity as will relieve its subject from criminal responsibility, must be such as relate to facts and objects, not mere wrong moral notions or impressions, and the aberration must be mental, not moral merely." (Ibid., p. 14, §11.)

MR. JUSTICE CURTIS:

"The law is not a medical or a metaphysical science. Its search is after those practical rules which may be administered without inhumanity, for the security of civil society, by protecting it from crime. And therefore it inquires not into the peculiar constitution of mind of the accused, or what weaknesses, or even disorder he was afflicted with, but solely whether he was capable of having, and did have, a criminal intent."

SUPREME COURT OF CONNECTICUT, HOSMER, C. J.:

"If a man be legally *compos mentis*, be he wise or unwise, he is the disposer of his property, and his will stands as a reason for his actions. • • • But it would demand great consideration before it should be affirmed, that the mere knowledge of the act a person is doing, which, for aught I can discover, may be asserted, of an idiot, would constitute him *compos mentis*. I think he must know something of the nature and consequences of the act. * * * It is a fact, universally known, that a person may be *non compos mentis* and yet possess great vigor of intellect and unusual power of reasoning. * * * His mind is unsound by reason of the delusive sources of thought. All his deductions within the scope of his malady being founded on the assumption of matters as realities, without any foun

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dation, or so distorted, and disfigured by fancy as in effect to amount to the same thing."

(Hale vs. Hills, 8 Conn., 39 (1830).

ALABAMA SUPREME COURT:

"We do not subscribe to the proposition that the term *non compos mentis* necessarily denotes a total deprivation or destruction of the intellectual powers. It denotes unsoundness of mind; not mere mental weakness, but a diseased or unhealthy mind,"

(Carmichael *in re*, 36 Ala., 514.)

MASSACHUSETTS STATUTE

Provides that the words "*insane person*," and "*lunatic*" shall include every idiot, *non compos*, lunatic, insane and distracted person.

(Pub. Stat. Mass., C. 3, §1, Cl. 10.)

CHIEF JUSTICE HORNBLOWER, of New Jersey, said, as to moral insanity in State vs. Spencer:

"I cannot yield to the doctrine, which has been suggested, founded upon what is called 'moral insanity,' that—

"Every man, however learned and intellectual, who, regardless of the laws of God and man, is guilty of murder or other high and disgraceful crime is most emphatically insane. Such doctrine would lead to the most pernicious consequences, and it would very soon come to be a question for the jury, *whether the enormity of the act was not in itself sufficient evidence of such insanity*, and then the more horrible the act the greater would be the evidence of such insanity."

(State vs. Spencer, 1 Zab., 196 (1846).)

CHIEF JUSTICE GIBSON, of Pennsylvania:

"There is a *moral* or *homicidal* insanity consisting of an irresistible inclination to kill. * * * The doctrine which recognizes this mania is dangerous in its relations, and can be recognized only in the clearest cases.

"It ought to be shown to have been habitual, or at least, to have evinced itself in more than a single instance. * * *

"If juries were to allow it as a general motive operating in cases of this character, its recognition would destroy social order, as well as personal safety."

(Commonwealth of Pa. vs. Mosler, 4 Penn. St., 266.)

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WARD ISLAND INVESTIGATION. — The report of the Standing Committee of the State Board of Charities to the State Board, of the investigation into the management of the insane at Ward's Island, has been made, and we are indebted to Hon. Oscar Craig, Chairman, for a copy.

It condemns the general management of the institution by the Commissioners of Charities and Corrections.

It finds that the insane have been harshly and brutally treated by attendants; and condemns in strong terms the system, as it now exists, of employing attendants, and characterizes the attendants themselves as wholly unfit for the place and duty.

The fatalities in several institutions due to brutality of attendants is a crying evil and needs immediate public attention.

From our standpoint the Mayor should hold the Commissioners of Charities and Corrections responsible for the conduct of these attendants.

President Porter should take just the same interest in having the insane kindly treated that he would in having them well fed or clothed. It is said that he gives his whole time to this office. We venture to suggest that one hour a day be devoted by this official to reform of these terrible abuses.

An entirely different class of attendants should be employed. Better wages, if need be, paid to secure them. Kindness and gentleness, with a good character, should be the indispensable pre-requisite to employment.

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This investigation has shown that in the year 1886 eighty attendants were dismissed for cause, of whom twenty-three were dismissed for intoxication, three for being intoxicated while on duty in the wards, and five for striking patients, while the discharges during the year, called honorable, embraced one-half of the whole staff of attendants.

How can we expect proper care of the patients of this institution under such a condition of things?

DR. MCDONALD is not to blame for this abuse, except, perhaps, in not more strenuously insisting upon its correction.

He does not select the attendants. He has only the power of dismissal, which he seems to have used very freely.

The Commissioners themselves are responsible, and the Mayor should insist upon a change, or obtain other Commissioners. This would secure the proper attendants.

The report calls attention to other grave abuses, but this is the crowning scandal of it all. Brutality of attendants seems to be the rule, not the exception, and until a complete revolution is made we may expect broken ribs and general scandals, of abuse of patients at Ward's Island.

It is not enough, as is usual, to blame and censure the doctors. They are not to blame. It is first the Commissioners, and if they neglect their duties it is then the Mayor and the Governor. The report says:

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"The fair presumption is against the moral or personal fitness of bartenders to fill the responsible office of attendants of the insane, and that the proofs show that the majority who fill this responsible office are not only of questionable antecedents and character, but that many of them are decidedly rough and coarse or untrustworthy, if not positively bad."

THE LONDON AND INTERNATIONAL CONGRESS OF INEBRIETY, held July 6, 1887, under the auspices of the London Society for the study and cure of Inebriety was a great success.

The President, DR. NORMAN KERR gave the opening address. That part of it referring to the MEDICO-LEGAL relations of Inebriety deserves a place in our columns, which want of present space forbids.

DR. CAMERON, M. P.—Gave an address, historical in character, of the movement in England and the DALRYMPLE Home at Rickmonsworth.

DR. T. D. CROTHERS gave an address on "Inebriety and Inebriate Hospitals in America."

Papers were read before the Congress by:

DR. N. S. DAVIS, President International Congress of Chicago on "The Physical Aspect of Inebriety."

By CLARK BELL, ESQ., of New York, on the relation of Intemperance to Insanity.

By. DR. EDWARD MANN, of Brooklyn, on "The Pathology of Inebriety."

By DR. LEWIS MASON, of Fort Hamilton, N. Y., on "The Relation which Disease has to Alcoholic Inebriety."

CHEVALIER PROSKOWETY on "Inebriety in Austria."

PROF. BINZ, on "German Law of Inebriety."

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REV. J. W. HORSLEY, on "Observations on Inebriety."

DR. PETITHAN, on "Legislation for Inebriety."

ABEL DICKSON, on "Asylums for Inebriates in London."

SURGEON MAJOR PRINGLE, M. D., on "Homicidal and Suicidal Inebriety."

DR. ALFRED CARPENTER, on "Meeting place of Vice and Disease."

DR. JOSEPH PANNISH, "Is there a climacteric period in Inebriety?"

DR. MOELLER, "Inebriety in Belgium."

REV. DR. DE COLLEVILLE, "Continental Legislation for Inebriates" an address by Dr. Wright of Bellefontane Ohio, and a Chairman's address by DR. B. WARD RICHARDSON.

There was a reception to DR. T. D. CROTHERS, editor of the *American Journal of Inebriety*, a grand banquet and a visit to the Dalrymple Home.

DR. A. MOTET has been elected General Secretary of the Medico-Legal Society of France, in the place of Dr. Th. Gallard, deceased.

This is an admirable selection. Dr. Motet has a large practical knowledge of the subject, and his studies peculiarly fit him for the position.

He is at the head of a leading private asylum in Paris, is an English as well as French scholar, which Dr. Gallard unfortunately was not. Dr. Motet takes a deep interest in the advance of Forensic Medicine in Foreign Countries, and we feel sure that the American and

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French Societies will be on much more intimate relations, and be in closer accord than was possible under the secretaryship of Dr. Gallard, owing to his ignorance of the English language and to the fact that the English Literature of Medical Jurisprudence was substantially a sealed book to him.

THE INTERNATIONAL CONGRESS AT WASHINGTON.

Returning from a trip abroad in the English, French and Belgian Capitals, just as our current number goes to press, we look in American journals for a resume of the Washington International Congress, as to the sections or branches that would interest our readers.

We find that our enterprising confreres of Philadelphia, The Medical Register, who published a daily during the session, gives us very little light as to the work of the section on Psychology, and we find that there was no work at all upon Medical Jurisprudence or Forensic Medicine, *per se.*

The MEDICAL RECORD, which attempts to give a *resume* is so unsatisfactory, as to the section presided over by Dr. Andrews of the Buffalo, N. Y. State Asylum.

As we go to press, the most reliable *resume* we have seen is that of the London Lancet, of date of Sept. 10, 1887, which has been printed in London, and crossed the ocean to us on the 19th of September, from which we are enabled to give our readers an idea of the labors in Neurology and Psychology.

This is a singular, we may say remarkable commentary on the want of enterprise which characterizes

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American Medical Publishers, and the splendid achievements in this field of our British Confreres. We learn that the following papers were read or contributed :

DR. JUDSON P. ANDREWS, "The Distribution and Care of the Insane in the United States."

DR. FIELDING BLANDFORD, of London, on "The Treatment of Insanity in the Private Houses and Asylums."

DR. HACK TUKE, "Modes of Providing for Insane and Idiots in United States and Great Britain," and on the "Rapprochment of American and British Alienists in Regard to the Employment of Mechanical Restraints."

DR. HENRY M. HURD, of Pontiac, Mich., "The Religious Delusions of the Insane."

PROFESSOR MENDEL, of Berlin, read a paper on "The Origin of the Upper Facial Nerve."

DR. E. A. HOMEER, of Helsingfors, Finland, "Histological Alterations following Amputation in the Peripheral Nerves, the Spinal Gangliæ and the Marrow."

DR. OTTO, a paper on "Nucleus Staining by Analine Dyes."

DR. J. LANGDON DOWN, of London, "Cases Illustrating the Prow-shaped Cranium with Neurotic Disease."

DR. GEO. H. SAVAGE, on "Syphilis in its Relations to Insanity."

DR. INGRAM, of Washington, D. C., on "Gunshot Wounds of Spinal Cord."

DR. DANIEL CLARK, of Toronto, Canada, on "Remissions and Intermissions in Insanity."

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DR HORACE WARDNER, of Arma, Ill., on "Occupation for the Insane."

DR. BOWER, of Bedford, England, on "Occupation for Insane in Private Hospitals in England."

DR. THEO W. FISHER, "Monomania and its Modern Equivalent."

DR. WALTER CHANNING, of Brookline, Mass., read a paper entitled "The International Classification of Mental Disease." He also read a paper by DR. BANNISTER, of Kankakee, Ill., entitled "Note on the Classification of Insanity."

DR. C. H HUGHES, of St. Louis, a paper on "The True Nature and Definition of Insanity."

DR. W. L. SCHENCK, of Boise City, Kansas, read a paper entitled "The Relation of State Medicine to Medical Jurisprudence."

The Congress was the largest ever held, and the arrangements to entertain the delegates were very elaborate and successful. Large number of medical men from the West and South were in attendance, the whole number attending being stated to be nearly five thousand, though the absence of prominent members of the profession from New York, Boston, Philadelphia and the East generally was noticed, due to the unfortunate circumstances attending the preliminary arrangements of the Congress.

PRIZES FOR ESSAYS ON MEDICO-LEGAL SUBJECTS.

The MEDICO-LEGAL SOCIETY OF NEW YORK announces the following prizes for original essays on any subject

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within the domain of medical jurisprudence or Forensic Medicine:

1. For the best essay—ONE HUNDRED DOLLARS, to be known as the ELLIOTT F. SHEPARD PRIZE.

2. For the second best essay—SEVENTY-FIVE DOLLARS.

3. For the third best essay—FIFTY DOLLARS

The prizes to be awarded by a commission, to be named by the President of the Society, which will be hereafter announced.

Competition will be limited to active, honorary and corresponding members of the Society at the time the award is made.

It is intended to make these prizes open to all students of Forensic Medicine throughout the world, as all competitors may apply for membership in the society, which now has active members in most of the American States, in Canada and in many foreign countries.

All details of the award will be determined by the Executive Committee of the Medico-Legal Society of New York.

The papers must be sent to the President of the Medico-Legal Society of New York, on or before April 1, 1888, or deposited in the Post Office, where the competitor resides on or before that day.

The name of the author of any paper will not be communicated to the Committee awarding the prizes.

All persons desiring to compete for these prizes will please forward their names and address to the President or Secretary of the Medico-Legal Society of New York.

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In case the essay is written in a foreign tongue, it should be accompanied by a translation into the English language.

It is hoped that all our members, whether active, honorary or corresponding, will take an interest in this effort to stimulate scientific inquiry and research in questions relating to medical jurisprudence.

Scientific societies in all countries are invited to lay this announcement before their members, and the co-operation of the legal, medical and public press, is respectfully solicited in bringing the subject to public attention.

CLARK BELL, *President*,
57 Broadway, N. Y.
ALBERT BACH, *Secretary*,
140 Nassau St., N. Y.

MEDICO-LEGAL PAPERS, SERIES 4 AND 5.

The subscriptions already received, to continue the publication in volumes of the original papers read before the Medico-Legal Society of New York, besides those already published in volumes Nos. one, two and three, have already reached a sufficient number to warrant their publication. It is highly desired that the subscriptions should reach one hundred copies, aside from the one hundred copies subscribed for by the Medico-Legal Society, so as to fully indemnify the publishers who take charge of the publication.

It is proposed to issue Series or Volume 4 of Medico-Legal papers during the year 1878, and to follow it with

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Series or Volume 5, as soon as practicable. The present list of subscribers are as follows :—

NOTE.—Members and others desiring to subscribe to this movement will please advise the editor of the JOURNAL, or any officer of the Society. The following is the subscription at the date of Septembrr 1st, 1887:

MEDICO-LEGAL SOCIETY.

The undersigned hereby subscribe for and agree to take of the Medico-Legal Society, or its assigns, the number of copies of Medico-Legal Papers, Series 4 and 5, to the commencement of Medico-Legal Journal, at the price of $3.50 per volume in cloth, or $2.50 in paper, provided at least sixty copies are subscribed for.

Dated January, 1887.

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And others.

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The volume will contain about 500 to 550 pages, and will be embellished with portraits after the style of Series or Volume 3. The price will be in cloth $3.50 and paper $2.50.

All members of the Society, subscribers to the Journal, authors of papers, libraries and others who are willing to subscribe, will please notify the editor of this Journal of the number of copies they will take, and it is hoped that enough subscribers will be obtained at once to make at least one hundred.

A copy of this statement will be sent the authors of papers, who will be allowed to subscribe for additional copies at the reduced price, for all future subscriptions, of $3.00 cloth and $2.00 paper, if notice is at once sent the editor of this Journal or Mr. Albert Bach, Secretary at No. 146 Nassau Street.

VACATIONS ABROAD—It has been our good fortune to take our outing, the past summer upon the Atlantic ocean, and in foreign countries.

We were present by invitation, at the June meeting of the British Medico-Psychological Association, and took part in the debate, upon the criticisms made by eminent members of that body, upon the action of the Government in inserting a clause, in the proposed new lunacy statutes, requiring judicial sanction to the commitment of the insane.

We think American experience and opinion, in both professions, would be in favor of such action, and that

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the fears entertained by British medical men, as to its work, would be wholly dispelled by a trial. We were the guest also of the same body at its annual banquet, given at the "Ship" at Greenwich, and tasted of most of the seventeen courses of fish that has made, "*the white bait dinner*" given at that celebrated hostelry, famous and world renowned.

Our thanks are especially due to Drs. D. Hack Tuke, Geo. H. Savage, H. Rayner, John Abercrombie, Vivian Poore, Henry Maudsley, Norman Kerr, Jabez Hogg, B. Ward Richardson, Mr. Ernest Hart, The Marquis de Leuville, Mr. Thomas Cave, M. P., Mr. Henry S. Welcome, Governor Waller, and others for entertainments, dinners and receptions that made, and serve to make London the most delightful capital in the world, to the foreign visitor.

We had a good look at Bethlem Hospital, and the large asylum at Hanwell under Dr. Rayner's charge, and was glad to meet Drs. Clouston, Urquhart and many others of the English and Scotch superintendents and alienists.

In Belgium, we visited the Hospice Guislain at Ghent, in charge of Dr. Jules Morel, the splendid new asylum at Tournai, of which Dr. F. Lentz is superintendent, and the insane colony at Gheel, as well as the asylum there under Dr. Peeters, not forgetting the church and shrine of St. Dymphna.

We were the guest of Dr. Desguin in the lovely city of Antwerp, of Dr. Jules Morel in Ghent, of the Brothers of St. Vincent de Paul at Moll, as well as at Tournai, and

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shall remember with heartfelt and unalloyed pleasure the warmth and kindness, of that charming hospitality, so characteristic of her citizens, which made our visit and stay in Belgium a delight.

We were very glad to assist at the July session of the Society of Mental Medicine, in the beautiful Belgian capital, and to take the hands of Prof. Lefebvre, Dr. Leon de Rode, Dr. Vermeulen, Prof. Heger and others.

The new Palais de Justice, is certainly the finest building of this kind, as we believe, in all the world, and is a credit to the taste and pride of the Belgian people.

We are under obligations to Monsieur Lentz of Brussels, of the Law Department of the Government, for attentions, and for copies of the Belgian statutes, relating to Lunacy and the reports, as to her insane asylums, and charitable institutions. We must not omit our obligations to the Brothers of St. Vincent de Paul, and especially the brother superior at Tournai and at Moll, to Brother Rudolph, and our friend and companion du voyage at Gheel, Brother Edouard, superior in charge at the Hospice Guislain.

It is these men who have at the asylum at Tournai and Hospice Guislain, the whole charge and care of the insane, except in medical matters, and to whom in my opinion, so much is due for the excellent condition and morale of these institutions.

In Paris we were the guest of Prof. Ball, who invited several medical men and their wives to meet us at dinner with his charming family, of DR. MAGNAN at St.

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Anne, with whom we breakfasted, of MOTET, who is the new Secretary-General of the French Medico-Legal Society, and of LUTAUD, who will come to America next year.

We visited SALPETRIERE and met DR. FALRET and saw his service, but our visit was unfortunate in date, as we missed Prof. Charcot, Dr. Christian of Charenton, Dr. Penard, Dr. Socquet, Dr. Ach Foville, Dr. Ritti, Dr. Grassi, Emile Hourteloup, the President of the French Medico-Legal Society, and several others, who were absent from Paris, on their vacation.

We know of no better or more enjoyable way, of spending a summer vacation, than to devote twenty days of it, to the healthful rest of an ocean voyage, and one or two weeks each to London, Paris, and the chief cities of Belgium. As "we should speak well of the bridge that carries us safe over," we are glad to mention in terms of high praise "THE GUION LINE," whose vessels, cuisine, courtesy of officers and general care of their passengers, are as we think, second to none upon the Atlantic ocean.

THE MEDICAL JURISPRUDENCE OF INEBRITY.

At the November meeting of the Medico-Legal Society the evening will be devoted to the discussion of this subject.

Short papers have been promised by Dr. Joseph Parrish of New Jersey, Dr. T. D. Crothers of Connecticut, Dr. Norman Kerr of London, Dr. Ed. C. Mann of Brooklyn, Dr. Wright of Bellefontaine, Ohio, and

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several others have been invited and are expected to read short papers on the medical side, and prominent members on the legal side will take part in the discussion, which must excite interest in the society.

PERSONAL. Mr. Clark Bell has been elected an honorary member of the Medico-Legal Society of Chicago.

Dr. FIELDING BLANDFORD.—Mr. CLARK BELL entertained Dr. BLANDFORD, of London, at luncheon on the eve of his sailing for Europe. The following American alienists were invited to be present:

Dr. Pliny Earl, Massachusetts; Dr. Henry P. Stearns, of Hartford Retreat; Dr. C. H. Hichols, of Bloomingdale Asylum; Dr. W. W. Godding, of Government Asylum, Washington; Dr. Th. H. Kellogg, late of Ward's Island; Dr. Walter Channing, of Brookline, Mass.; Dr. Barstow, of Flushing Asylum; Dr. A. E. Macdonald, of Ward's Island; Dr. Burrall, of Canandaigua Asylum; Dr. Geo. C. S. Choate, of Pleasantville Asylum; Dr. Fordyce Barker, New York Academy of Medicine; Dr. M. Allen Starr, of New York; Dr. Ira Russell, of Winchendon, Mass.; Dr. W. G. Stevenson, of Poughkeepsie; Dr. Buttolph of New Jersey; Dr. Joseph Parrish, of Burlington, N. J. Dr. BLANDFORD returned by the *Umbria*, and takes with him the warm wishes of his American admirers, who will remember his visit with pleasure.

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MEDICO-LEGAL SOCIETY OF CHICAGO,

Medico-Legal Society of Chicago. Second annual meeting held June 4, 1887, in parlor forty-four Grand Pacific Hotel, President D. A. K. Steele presiding.

The minutes of the last meeting were read and approved.

The following gentlemen, upon recommendation of the Executive Committee, were unanimously elected to acting membership: Dr. Henry Gradle, Dr. C. D. Winscott, Dr. J. H. McDonald, Dr. J. E. Hooper and Dr. J. W. Eliles.

Dr. E. J. Doering gave notice, through the Secretary, that at the next meeting of the Society he would move the following amendment to the constitution, to be known as Act 10, Section 4.

"The Society may elect, by unanimous vote, distinguished physicians and lawyers to honorary membership. Honorary members shall be exempt from assessment and payment of all dues, and shall enjoy the privileges usually accorded to honorary membership."

The report of the Treasurer, Dr. E. W. Andrews, was read, and on motion of Dr. Doering referred to an auditing committee to be appointed by the Chair. Dr. Winters and Dr. Mortin were appointed to comprise this committee.

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The Society then elected the following officers for the ensuing year:

President, Dr. E. J. Doering; First Vice-President, Dr. Boedne Bettman; Second Vice-President, Eric Winters, Esq.; Treasurer, Dr. L. L. McArthur; Secretary, Dr. Scott Helm.

The retiring President, Dr. D. A. K. Steele, then delivered his valedictory address:

Dr. Earle and Dr. Schaefer were then appointed a committee of escort to President-elect Doering.

Mr. Winters, on behalf of the auditing committee, reported back the accounts of the Treasurer as correct, recommending that a copy of the same be made and filed with the Secretary.

In accordance with a motion made by Dr. Henry T. Byford, the report of the committee was unanimously accepted. The report of the committee appointed at the March meeting to take action on Dr. Sawyer's paper on "The Defects of the Present System of Coroners' Inquests" was deferred until the next meeting.

Adjourned.

SCOTT HELM, M. D.,
Secretary.

MASS. MEDICO-LEGAL SOCIETY.

ROOMS OF THE BOSTON MEDICAL LIBRARY ASSOCIATION,
June 7, 1887.

The tenth annual meeting was called to order at 11.20 A. M., by President Winsor. Twenty members were present. Records of the last meeting were read and approved.

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Medical Examiner Holt, of the committee to prepare a blank form to be used in reporting autopsies, made his report, recommending a printed form which he presented and also advised the purchase by each medical examiner of Virchow's Post Mortem Examinations. The report was accepted, and Medical Examiner Holmes moved the adoption of the printed forms. Considerable discussion ensued, and it was finally voted to reconsider the vote accepting the report of the committee, and to refer the blank form to it again, with request to report at the next meeting of the society. Voted on motion of Medical Examiner Wright, that a copy of the blank form be sent to each member, with the request that he examine it and suggest to the Committee any changes that seem desirable.

The following officers were elected for the ensuing year:

President, F. Winsor, M. D

Vice-President, J. G. Pinkham, M. D.

Treasurer, C. C. Power, M. D.

Corresponding Secretary, B. H. Hartwell, M. D.

Recording Secretary, W. H. Taylor, M. D.

Standing Committee, F. W. Draper, M. D., S. D. Presbrey, M. D., A. F. Holt, M. D.

President Winsor announced the death of G. P. Pratt, M. D., of Cohasset, a member of this Society.

Medical Examiner Tower briefly referred to the life and character of Dr. Pratt.

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On recommendation of the Executive Board the following gentlemen were elected to active membership:

Medical Examiner J. W. Spooner, of Bingham.
" " J. Alban Kite, of Nantucket.
" " T. M. Durell, of Somerville.
" " Wm. Holbrook, of Palmer.
" " W. F. Stevens, of Stoneham.
" " G. M. Morse, of Clinton.
" " J. G. Hayes, of Ipswich.

Charles Harrington, M. D., of Boston, and Hosea Kingman, Esq., District Attorney for the Southeastern District, were elected Associate Members.

Voted to adjourn.

W. H. TAYLOR,
Secretary.

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TOXICOLOGICAL.

IMBIBITION of POISONS.—The response of Prof. John J. Reese to the inquiry raised in the June number of this journal as to the scientific feasibility of discriminating between cases of death by poison administered during life, from those where the poison was inducted into the abdominal cavity after death, appears in our columns. We should be glad to hear from the chemists of all the world upon this topic.

How can science detect the murderer who poisons his victim with arsenic or other toxic agents, and then after death, at once, under pretext of embalming the body, fills the abdominal cavity with a strong solution which is absorbed?

We hope to hear from Dr. Thos. Stevenson and the the English chemists and analysists upon this question; from Prof. Dragendorf and the Russian scientists. From Brouardel and the French chemists. From Otto and the Germans; and indeed from men of science in all lands to whom we commend the questions raised in our June number, and tne interesting paper of Prof. Reese, our distinguished American chemist, upon this subject.

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JOURNALS AND BOOKS.

THE LAW QUARTERLY REVIEW. Prof. F. Pollock, M.A. LL. D., Editor (London).

The July number contains: Two papers on the Land Transfer Bill. 1. By Hugh M. Humphrey. 2. By C. H. Sargent. The Dean of Exeter by Ed. A. Freeman. The Bill of Sale Acts, E. Cooper Willis, Q.C. Eminent Domain, by Carman F. Randolph. Legal Composition, by J. G. Mackay. English Law, by Prof. Pollock.

CHICAGO LAW TIMES. Catherine V. Waite, Editor (Chicago).

The July number contains a portrait of John Jay, Chief Justice, and the following articles: International Copyright Union. The President's Vetoes, by Melville W. Fuller. Suffrage a Right of Citizenship, by Charles B. Waite. Lysander Spooner, by William Brockett. A Celebrated Case—The Kerr vs. Philips Case. The Medico-Legal Department, by Marshall D. Ewell, Esq.

THE JOURNAL OF JURISPRUDENCE AND SCOTTISH LAW MAGAZINE. (Edinburgh).

The September number contains the following articles: The Secretary for Scotland. A Great Scottish Legal House. The Infraction of Evidence. The Decrease in Litigation. The Sheriff of Lanarkshire Bill. Conditions upon Creditors. Services of Experts in Judicial Inquiries.

THE CANADIAN LAW TIMES. E. Douglass Ameer, Esq., Editor. Toronto, Canada.

The August and September numbers contain: Editorial articles on Ontario Legislation and Lis Pendens. Editorial Review on Reports. Vacation. Codification Disallowance. Unlicensed Practitioners. Is the Third Party Rule Modern? Occasional Notes are continued and the Review of Exchanges.

THE AMERICAN LAW REGISTER (Philadelphia).

The July and August numbers are on our table. The original articles are "Color of Title" and "Constitutional Statutory Jurisdiction." The ecent American Decisions are noticed in the State and United States

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Courts and the "Abstract of recents decisions," keep well up with the Courts of last month in most of the States as well as in the Federal Courts.

AMERICAN LAW REVIEW. Editors: Lucien Eaton, S. D. Thompson, St. Louis. (St. Louis, Mo.) Leonard A. Jones, Boston.

The July-August number contains: The Boycott as Ground for Damages, by John K. Wagner. Sunday Idleness, by James T. Ringold. Sueing Receivers in Foreign Jurisdictions, by Eugene McQuillin. Services of Experts, by Clemens Herschell. Municipal Warrants, by Charles Burke Elliott, with Editorial Notes of value to every lawer.

ARCHIVES OF CLINICAL PSYCHIATRY AND NERVO-PATHOLOGY. (St. Petersburgh, Russia.) Mierzejensky, Editor.

Vol. 5, No. 1 contains: A Case of Idiocy, by Privat Doc Danillo. The Pathology of the Central Nervous System in Senile Dementia, by D. Bellakovar. The Posterior root in the Spinal Cord, by Prof. Bechterev. Of the Central ending of the Third faciae Nerve. The Central Ending of the Audi tory Nerve, by Prof. Becterev. Para myoclonus multiplex, by Dr. R. Y. Balken. The number concludes with a critique and a review of books.

JOURNAL OF MENTAL SCIENCE. D. Hack Tuke and George H. Savage, Editors.

The July number, 1887, contains original articles by A. Campbell Clarke, M. D., on Aetiology, Pathology and Treatment of Puerperal Insanity. Jas. G. Kiernan, M. D., American Problems in Psychiatry. P. J. Kovalewsky, Folie du Doute. Rev. W. J. Davies, D.D., The True Theory of Induction. Dr. C. Heimann, Cocaine in Mental Disorders. The usual Clinical Notes and Cases follow. The reviews are quite extended, and those also of the English and Scotch asylum reports. The meetings of the British Medico-Psychological Association are carefully reported and its work.

ANNALES MEDICO-PSYCHOLOGIQUE. (Paris.) Chief Editors: Baillarger Ach-Foville and Ritti.

The May, 1887, number contains a chronique by Foville of the working of the law in Illinois requiring the verdict of a jury to commit the insane mainly extracted from an article in the *International Record of Charities and Correction*. The original papers are, Un Degenere Héréditaire by Drs. H. Mabille and J. Ramadier. Délére Hypochondriaque et du délére Ambitieux, by Dr. Baillarger. Treatment dn délére Epileptique, by Dr. Bessierne. Dr. E. Regis contributes the Archives Cliniques. In the Medico-Legal Department, Dr. A. Giraud resumé at length the remarkable case known as the Lombardi case, arising at Geneva, Switzerland in 1885. Dr. Giraud cites the various opinions of the different experts that have been con-

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sulted on this case, which he reviews. This conflict of views are remarkable. Dr. Charpentier furnishes a detailed statement of the transaction of the Societie de Medico-Psychologique at the January and February Session, 1887, with a full analysis of the papers read and of the debates. The reviews contain an extended and interesting review of the action of the Paris Academy of Medicine on Somnambulism, contributed by Dr. Mesnet, and of a contribution by Dr. Christian to the Paris Societe of Medicine in March, 1887, on "*Apropos du Surmenage Cerebral.*"

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Books, Journals & Pamphlets Received.

THE SOCIETY OF MENTAL MEDICINE OF BELGIUM.—Through DR. JULES MOREL. Nos. 1 to 20, and Nos. 35 and 36 of the "Bulletin de la Societe" de Medecine Mentale de Belgique

DR. MAGNAN, (Paris.)—Expose des Titres et Travaux, Scientifiques du Docteur V. MAGNAN, 1886.

DR. A. LUTAUD, (Paris.)—Etude sur les Hopitaux d isolement en angleterre. By Lutaud and Walter Douglas Hogg (1886.) Etude Medico Legale sur les ASSURANCES SUR LA VIE et le Secret Medical. G. Stemhill, Publisher (1887.)

DR. A. MOTET, (Paris.)—Bulletin Tome IX—2d partie Societie de Medicine Legale de France (1887.) Les Faus Temoinguages des enfants devant la justice, (1887.)

EDWIN CHADWICK, ESQ., C. B.—Alternative Remedies for Ireland (1887.) The Elementary Education question and the half time system (1887.)

Dr. D. HACK TUKE.—Judge and Doctor (1887,) The After Care Association (1887.) Apropos de-une-Visite a GHEEL par Dr. Hack Tuke, traduit par M. A. Claus. Eleve interne a la Hospice Guislain (1885.) Portrait sketch of the elder Tuke. History of the insane in the British Isles.

DR. VICTOR DESGUIN, (Antwerp.)—Les Symptomes Cerebraux du Rhumatisme (1870.) La Stigmatisie d Anvers. Review of Dr. Erlenmeyers memoir upon symptom and treatment of Mental Diseases. Un cas de Rhumatism Cerebral (1871.) Rapport sur les Moyens a opposer a luabus croisant des boissons alcoholiques (1872.) De l' abus des Boissons Alcoholiques (1878). Du Cuivre—en thereapeutiques et en Hygiene (1886.) Le treatment des la Thtisie Pulmonaire (1887.) Sur le Nervoisme du notre epoque, (1885.)

DR. F. LENTZ, (Tournai.)—Notice Sur l asile des Homme Alienes a Tournai.

DR. NORMAN KERR.—Proceedings of the Colonial and International Congress of Inebriety (London), 1887.

W. B. RIDGES.—My Rambles Through Bible Lands (1886).

Dr. GEORGE H. ROHE.—Recent Advances in Preventive Medicine (1887).

DR. JOHN H. RAUCH.—Report Ill. State Board of Health (July, 1887).

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HON. OSCAR CRAIG.—Report of State Board of Charities and Correction on Ward's Island Investigation.

DR. E. FLETCHER INGALLS.—Suppurative Inflammation of the Antrum. Incubation of the Larynx (1887).

DR. C. W. MOORE.—Advances in Medicine and Surgery in Forty Years (1887).

DR. W. E. EVANS.—Thirtieth Transactions, Mo. Medical Association (1887).

DR. A. R. Urquhart.—Sixtieth Annual Report. Muney's Royal Asylum, at Perth, Scotland (1887).

SCOTCH BOARD OF LUNACY COMMISSIONS.—Twenty-ninth Annual Report (1887).

JAMES HENDRIE LLOYD, M. D.—Moral Insanity in its Medico-Legal Aspects (1887).

DR. A. V. PARK.—Case of Pyelitis (1887).

RALPH L. PARSONS, M. D.—Classification of Mental Diseases (1887).

DR. FRED. H. WINES.—Ninth Biennial Report of State Board of Charities of Illinois (1887).

G. W. H. KEMPER. M. D.—Practical Thoughts for Physicians (1887).

AMOS G. HULL, ESQ.—State Medicine (1887).

ROBERT C. FOX, LL. D.—Announcement of National Medical College, Washington, D. C. (1887).

J. B. BAILLIERE *et fils*.—Traite Complet. l' Examen Medical dans les Assurances sur la vie (1887).

DR. ALBRECHT ERLENMEYER.—Die Morphiumsucht und Ihre Behandlung. (p. 462.) (Louis Heuser (1887).

WILLIAM G. STEVENSON, M.D.—Genius and Mental Disease (1887).

DR. G. A. TUCKER.—Files of Sidney and Australian Newspapers (1887). —Lunacy in Many Lands.

HON. OSCAR CARIG.—Report of State Board of Charters Committee on Ward Island Investigation.

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THE MAGAZINES.

THE ECLECTIC for October is a superb number and contains sixteen choice selections from the leading reviews.

LIPPINCOTT for October is out. It contains Louise Stockton's story "Apple Seed and Brier Thorn," and has its usually good table of contents.

GODEY'S LADY'S BOOK.—Mrs. Croly (Jennie June) has assumed editorial control of this old and valued journal, and its pages are racy, sparkling and full of interest.

THE ATLANTIC MONTHLY—Continues Paul Patchoff. Dr. Holmes' One Hundred Days in Europe and "The Second Sin," in October number. "An Uncloseted Skeleton, The Secret of the Far East and Emerson's Genius, are among its articles.

BULLETIN BELGIAN SOCIETY MENTAL MEDICINE (No. 45, 2d fasic).—Contains a portrait of the Guislain statue and an account of the proceedings at its unveiling at Ghent last July, with the addresses, besides two papers contributed by Dr. Lentz of Tournai.

THE ASCLEPIAD.—Dr. B. Ward Richardson devotes the last number to an epitome of the Great advancements made in medicine during the reign of Victoria, which he styles the "Victoria Era."

THE ALIENIST AND NEUROLOGIST.—The July number is an exceedingly able and interesting one, and Dr. Hughes is making this journal one of the ablest in its domain in the world.

JOURNAL DE MEDICINE.—Dr. Lutaud continues his strictures on M. Pasteur and his theory, besides, ably editing his journal in other respects. We hoped to have seen Dr. Lataud this summer in America, but he promised us in Paris in August that he would come next year with some of his colleagues.

LITTELL'S LIVING AGE—Continues in September 24th number: Richard Cable, the Lightshipman; and among other articles are: The Island of Sark; Ancient and Modern Painted Glass; Eberhardt; The Society of Dogs. This number completes the 59th quarterly volume of the 5th series.

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SCRIBNER'S MAGAZINE.—The October number contains: Harold Frederic's story of Seth's Wife; concludes The Sacred Flame of Torinje and The Thackeray Letters. Henry O'Aury contributes a charming article.

DER GERICHTSAAL (Band. XL., Heft 1).—This able journal, under the chief editorship of Dr. F. Van Holtzendorf, occupies the very front rank in Juridicial journals abroad. Dr. Jur Carl Schneider of Tubengin, contributes a paper on the Right of Suffrage. Prof. Dr. S. Mayer, of Vienna, one on, A Voice from Italy on Jury Trials. Judge Conrad Thömdrel, of Lärben (Silesia) on Enforced Education for Criminals under age.

THE THEATRE has again appeared and is as attractive as ever.

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AARON J. VANDERPOEL, ESQ.

The death of Mr. Vanderpoel is a loss to the Bar of the city of New York not easily filled.

Of a genial nature, kindly heart, and charming disposition, he endeared himself to the members of the profession with whom he came in contact in a remarkable manner.

He was born in Kinderhook, N. Y., in October, 1825. He studied law with Judge Aaron Vanderpool and Wm. Curtis Noyes, was of the firm of Brown, Hall & Vanderpoel and of Vanderpoel, Green & Cuming. He was a member of the Century, St. Nicholas and Holland Clubs in this city, and President of the Manhattan Club for many years.

He was one of the older members of the Medico-Legal Society, Librarian of the Law Institute, President of the Law Department of the University of New York and of many other organizations in New York.

Resolutions were passed at his death at the meeting of the Bar of New York at which Chief Justice Van Brunt presided, where addresses were made by the Chief Justice, by William Allan Butler, Mr. James C. Carter, Frederick R. Coudert, Wm. Burke Cochran and others, and at the October meeting of the Medico-Legal Society the following resolutions were offered by Mr. Roger Fos-

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ter of the Bar, and remarks made by Mr. Foster, Mr. Simon Sterne and others.

Whereas, since our last meeting, this society has been bereaved of our esteemed associate, Aaron J. Vanderpoel, LL. D.; who, being descended from a family containing distinguished members of each of the two professions from which our ranks are recruited, took a deep interest in our pursuits, as he did in all branches of learning and science that threw light upon the history, theory or practice of the law; of deep reading and wide experience, equally well versed in books and men, never betrayed by his learning into pedantry, nor by his knowledge of human nature into cynicism; an accomplished antiquarian, but a constant friend of proposed improvements in the methods of the administration of justice; a successful advocate and a sage counsellor of men of affairs, seeking for his recreation the lanes and byways of legal literature; of great public spirit, while continually refusing office; in constant conflicts, without a single enemy; whose career challenges our admiration, while his character won our affections,

RESOLVED, that we, the members of the Medico Legal Society, deplore his loss and deeply sympathize with the surviving members of his family;

AND IT IS FURTHER RESOLVED that a copy of these resolutions be sent to Mrs. Aaron J. Vanderpoel as an inadequate expression of the feelings of our hearts.

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GUY HUMPHREY McMASTER.

Judge McMaster was born January 31, 1829, at Clyde, New York. Graduated at Hamilton College in 1847, was tutor in Franklin Academy, New York, after leaving college; studied law and was admitted to the Bar in 1852, and commenced the practice of the law at Bath, N. Y. In 1863, he was elected Judge and Surrogate of Steuben County, to which position he was re-elected for twenty years. When these offices were separated he was elected Surrogate, which office he held at the time of his death in September, 1887. He was for many years a corresponding member of the Medico Legal Society of New York, and was in the front rank of jury lawyers in the Seventh District, where he resided, which did not interfere with his judicial labors, while practising in the Supreme Court and Court of Appeals.

He was a noble character; a profound jurist, an excellent pleader, elegant, lovable, conscientious, broad, true and kind; and there is no jurist or judge in this State who had warmer or truer personal friends, and none who better deserved them or their confidence. C. B.

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Ghent, Belgium.
Dr. Urquhart,
Perth, Scotland.
Dr. Fielding Blandford,
London, England.
Edwin Chadwick, Esq., C. B,
London.
C. F. Buswell, Esq.,
Boston, Mass.

*Deceased.

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CRIMINALITY.

By William G. Stevenson, M. D., of Poughkeepsie, N. Y.

(*Continued from September Number.*)

Testimony is conclusive in establishing the heredity of many neurotic diseases, such as a simple nervous temperament, neuralgia, chorea, hysteria, hypochondriasis, inebriety, criminality, insanity—whether perceptional, intellectual, emotional, volitional or maniacal—or as general paralysis, idiocy and dementia. Assuredly it is a fact which none deny, that the offspring of nervous, insane, epileptic, inebriate, consumptive, scrofulous or criminal parents, are more liable to develop some special form of disease than those whose parents are free from any vitiating cause. They have organizations which render it not only more possible, but more probable for ancestral vice to appear, although the particular form which this vice may assume is not necessarily determined by the parent. Many neurotic diseases, like physical forces, are correlatives of each other. They are metamorphosed oftentimes in their transmission, so that what was neuralgia in the parent is chorea or hysteria in the offspring, or chorea or hysteria may be transformed into epilepsy, and this into in-

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sanity, and the insanity may, in a third generation, develop phthisis, dipsomania or criminality. Conversely, criminality or drunkenness may engender epilepsy or madness; and thus through the entire category of nervous manifestations, testimony is added to sustain the fact that cause and effect are as invariable in the intellectual and moral, as in the physical world; and that through heredity the physical, intellectual and moral forces of the ancestor largely determine the physical, intellectual and moral forces of the offspring.

In this connection it is important to remember that the conditions or factors which so influence character may lie dormant in one generation, existing only as potential elements which may spring into activity at any time when influenced by favorable surroundings. There is a diminished stability of organization; an equilibrium more easily disturbed, and which, when moved from its balance, is less liable and less capable of resuming its original position. A few examples will illustrate this important question.

Dr. Morel reports the following cases: An educated gentleman who, although addicted to excessive alcoholic indulgences, occupied an important position; his fifth and only surviving child exhibited pleasure in cruelty to animals when yet a mere lad, was incapable of profitable study, and at the early age of nineteen insanity was fully developed. A son of an eccentric and intemperate father had cruel propensities in early youth, was ine-

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briate in later years, and eventually died of general paralysis. A man died of chronic alcoholism, leaving seven children, of whom the first two died of convulsions, the third became insane at twenty-two, and died an idiot; the fourth was suicidal, culminating in idiocy; the fifth was misanthropic; the sixth, a daughter, suffered from hysteria with intermittent insanity; while the seventh had good intelligence, but was nervous, having gloomy forebodings as to his mental future. The same high authority cites a family history in which the great-grandfather died a drunkard; the grandfather, also given to drink, died a maniac; his son, though sober, was hypochondriacal, and of homicidal tendency; while a son of the fourth generation terminated the family line in idiocy. Dr. Morel also states that an examination made by himself into the mental condition of one hundred and fifty children of the Commune, from ten to seventeen years of age, taken from behind the barracks, with arms in their hands, revealed the sad fact that alcoholic drinks had, through inheritance, stamped upon them physical, intellectual and moral degeneracy.

Da Gama Machado affirms that a wealthy lady known to him had an overpowering passion for gambling, which she would continue through the night. She died of consumption. Her son developed the same liking for gambling, and also died of consumption; while his daughter inherited a similar passion and died of the same disease.

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Who is there so bold as to deny the influence of organization in such examples?

A notable instance of inherited organization leading to crime is given, by Dr. Despine, of three brothers; the first had a son who received a life sentence for robbery and murder; the second had two sons, both of whom committed murder, and a grandson who was transported because of robbery; the third brother had seven children, of whom the first committed robbery and died in prison, the second was accidentally killed while attempting burglary, the third was convicted for robbery, the fourth and fifth (daughters) were imprisoned for theft, while a child of the seventh son was condemned to death for robbery and murder.

There is record of two sisters, aged respectively thirteen and seventeen; the younger had gentle manners and industrious habits, while the elder was the opposite, and endeavored to induce her sister to murder her mistress; failing in this, she endeavored first to strangle her sister and afterwards to commit the murder, but was unsuccessful in both attempts. She was arrested and brought to trial, when it was learned that her grandfather was given to homicidal impulses, and had destroyed his own wife. Here is seen a case of atavism, where a vice of character lay dormant during the second generation, but became an active destructive force in the third.

That suicidal monomania is influenced by heredity is a fact attested by all alienists; and Esquirol gives the his-

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tory of a family in which the grandmother, mother, and granddaughter committed suicide.

Moreau gives the history of an innkeeper, who, during the reign of terror, robbed and murdered many who came to his house; he was denounced by his daughter and brought to trial, but escaped conviction; the daughter who denounced her father was nearly murdered by a brother, and subsequently committed suicide, as did also another brother; while a sister was epileptic, imbecile and paroxysmally violent, and her daughter, being the third generation, was maniacal, and here the family line terminated.

Here, then, is seen in the first generation acute intelligence, but an absence or perversion of the moral sense, as evidenced by robbery and murder; suicide, homicidal violence, epilepsy, inebriety and mania marked the second generation; while with mania in the third generation, this degenerate family line was extinguished. What a commentary have we in these examples, on the heredity of physical, intellectual and moral alienations. Thus is seen the immediate and direct results of a bad inheritance, and while we cannot foresee the type of degeneration which will follow ancestral vice of character, yet we can prophetically declare that some form of physical, intellectual or moral degeneration will come from it, and thereby determine the possibility of crime.

Having first established the actual and possible inequality of man in physical, mental and moral endowments, I have endeavored to demonstrate the potency of

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heredity in transmitting the specific and personal differences, and, from the many facts before us, I reason that the law of the conservation of energy is as well established within the realm of mind as in the external physical universe. It permits mutability, but negates destructibility. Motion may be transformed into heat, or heat give place to light or electricity, which again may be reconverted into the original motion; but throughout all the stages of mutation nothing is lost and nothing created, but everything is conserved; the form of energy is changed, but its quantity and essence are the same and indestructible. So, too, with nervous and mental phenomena. A simple peripheral impression may terminate in the spinal centre, causing a simple motor impulse through excito-motor reflexion, or the impression may pass on to the sensory ganglia, and there become a conscious sensation from which the same motor impulse results through sensori-motor reflexion. Instead, however, of causing a motor impulse directly through either the spinal or sensory centres the impression goes onward and upward to the cerebral hemispheres where an idea is evoked, and the motor impulse results from ideo-motor reflexion; or the idea may first become emotional, or, passing by the emotional centres, it may call forth the intellectual operations, and then directly through the ideo-motor centres or indirectly by volitional reflexion, the same motor impulse results, thereby demonstrating not only the correlation, but the conservation of nervous energy.

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The brain, which represents the highest and noblest evolution of matter, and in functional activity is exalted over every other nervous centre, is the organ of the conscious mind; by which I do not mean a concrete substance or an objective entity of definite and unalterable power, but simply an abstract conception or definition of brain function. It is a special exhibition of organization exclusively pertaining to the hemispheres of the brain, as the sight is to the eye or hearing to the ear. It has not, physiologically speaking, a tangible material existence, but, like heat, light, electricity or gravitation, it is a condition of matter, and is, independent of its nature or source, dependent on cerebral organization as a medium through which to manifest its energy. To deny that mind once created, may and does exist in some varied or unknown condition of force, independent of organization, would be to affirm that energy of any kind, once created, in any way or by any cause, can be annihilated, which idea cannot be entertained. But since the existence of mind is known only through the manifestations of its workings, and since these manifestations exist only through nerve tissue, we are justified in affirming that nerve energy is correlated with nerve tissue, and that its degree of power or form of expression depends entirely on the evolution of nerve structure. Where there is no brain there is no conscious mind, no thought, no evidence of ideational life. These exist and develop, or retrograde and perish, in direct proportion as brain tissue exists and develops or degenerates and dies.

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The late Sir Henry Holland, when weary from physical work, forgot every word of German, which returned to memory when strength was restored. Such evidence as this, together with the fact that mind is enfeebled under conditions of physical disease and during the decline of strength in advancing years, points directly to the conclusion that mind is affected by matter, and the conditon of mind, either as active or latent energy, depends upon the degree of brain development.

This conclusion becomes an unanswerable and aggressive truth, when we further consider that the type of mental and nervous diseases which exist in different persons, is exactly that form which is in accord with their respective mental developments. Ideational insanity cannot exist in the infant, because the brain development has not yet rendered possible the existence of ideas. So, too, with savages or any class of men of inferior organization. The mental diseases which afflict them are necessarily of a lower order, so to speak, than exist in organizations higher in the scale of evolution, and any scheme of philosophy which ignores the facts presented by disease, or by the non-development of brain structure as found in infancy, and in the lower types of man, and in lower animal life, evidently denies itself of that which is most essential to a perfect knowledge of the human mind and its mysterious phenomena.

Where mind does not exist, evidently it cannot degenerate, and in its unfolding, its degeneration can only correspond with its progress. Hence we find that the

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most common form of insanity in savages is imbecility, and in children it is idiocy; conscious mind, in both cases, being either absent or arrested in its development. Moral insanity, in like manner, cannot exist where the moral sense does not exist. Dr. Maudsley justly says that "before the native Australian savage, who has not in his language any words for justice or vice, nor in his mind any such ideas as these words convey to us—before he can become morally insane he must be first elevated to our level of humanity and civilization. Development must precede retrograde metamorphosis, and mental organization must precede mental disorganization."

The same facts and arguments apply with equal force and pertinence to all expressions of volition, which is not an entity of self-determining powers, by the exercise of which man is capable of assuming virtues, arrogating phases of character, and performing special acts, whenever it pleases his arbitrary purposes. Neither has the will an autocratic control over actions or ideas, but it represents simply the highest exhibition of nerve force, as brain does of nerve matter, and is directly dependent on cerebral organization for the quality and force of its manifestations, and since this organization by inheritance is impressed by ancestral peculiarities, it is evident that it will to that degree modify the mental superstructure arising therefrom.

Well directed education and change of surrounding conditions can undoubtedly greatly modify the nature of

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mental life, but they cannot entirely overcome and negate that which lies in silence and in strength behind, the organization which so imperiously directs every action and thought. Accepting, then, the physiological fact that conscious mind and brain are as intimately united as cause and effect, and that the character of the mind depends primarily upon the nature and degree of molecular brain development—which development is measured according to the inherited capacity of the brain tissue, which capacity differs in each and every person—we must believe that each individual has, through his inherited organization, a special power of actual and possible brain energy, and that, in order to justly judge of his actions and his responsibilities, his own organism should furnish the only reliable standard by which to determine facts. Organization limits the influence exerted by environment, while environment limits and modifies the development of the capacities of the organization.

By this rule only can the demands of justice be satisfied in dealing with that large class of humanity known as criminals, whose deeds have furnished so many pages of the world's history. To the question, "Why is one man a criminal?" I answer, for the same reason that another is a moralist, or an honest, law-abiding citizen. Either an inherited organization having morbid antecedents gives the bias to development and action, or a constitution, originally well endowed, is so modified by morbid influences as to render possible subsequent moral alienation. Criminals are such, either because

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they inherit a brain structure potentially incapable of generating moral faculties, or, through the influence of repressive environment, the development of mind does not evolve sufficient moral strength to guide and control the lower propensities of man's nature.

In either case, however, criminals are, generally speaking, diseased elements, or members, of the body politic —born of it, belonging to it, and of necessity correlated with it in every stage of human evolution. Positively they are diseased in that, as a class, they bear evidence of bodily infirmity, neurotic diseases largely predominating, either in the milder types, or as epilepsy, inebriety and insanity, which, with scrofulous and tuberculous development, determine with certainty the fact of bodily and nervous degeneration. Negatively, this position is strengthened by the fact that, being perfectly conscious of punishment received for past offences, as well as having a certain assurance that retributive justice will be executed for every offense in the future, yet they close their eyes to all results, and apparently without dread of the coming day of wrath, rush wildly, heedlessly, remorselessly into the seething vortex of criminality, and pause not till the strong arm of the law interposes for the protection of human society. They will reason about the crimes perpetrated, but do not comprehend the moral wrong committed.

This view is sustained by the learned Dr. Despine, who, speaking with the authority of knowledge, says: "There must be something abnormal in the disposition

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of criminals, when they yield with the utmost facility to desires which would excite the strongest repugnance and horror in a truly moral man. Does not this abnormal state reveal itself in the clearest manner, when, contrary to what poets and moralists have represented, we see the wretch who has committed crime exhibiting no symptoms of remorse, but rather a disposition to repeat the same criminal act?"

The criminal does not necessarily possess an unhealthy body, as commonly understood, although generally there exists a latent neurotic bias, which may, and frequently does, develop into actual nervous or bodily disease; inebriety, epilepsy and insanity predominating.

Intelligence may be acute, the perceptive and reasoning faculties existing, it may be, in a high state of development. But with all this there is moral deficiency; a perversity of thoughts and desires, with violent passions, which being uncontrolled by the moral faculties (not necessarily because the perversities are greater than in other men, but because the moral force is less), there result immoral, criminal acts which are correct exponents of the organic cause by which and through which they alone exist.

A striking example of acute intellectuality with defective moral sense is presented in the case of the noted scholar and criminal, Ruloff, who expiated his crimes with his life, at Binghamton in 1871. He possessed a mind remarkable for its power of critical analysis and subtle reasoning, which, with a retentive memory, en-

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abled him to become a profound scholar in linguistic research. His intelligent knowledge enabled him to direct at times his own defense, which was marked by ability and skill; and yet with all this intelligence and intellectual vigor, he was a moral imbecile, the moral sense being undeveloped, or, at most, developed but to a limited extent, while the intellect was strong. He was without regret or remorse for the crimes he had committed, and had no fear or dread of the doom awaiting him, affirming that his acts were "without regard to the existence of a God or devil, a heaven or hell," and adding that this had been to him a pride during all his life. He maintained this indifference to the last, refusing to have even a prayer offered in his behalf.

This accords with the expressed views of Dr. Despine, whose investigation of crime and criminals has been both extensive and profound, and who states as a general fact that criminals are "marked by the absence of all moral remonstrance before the act premeditated, and the absence, not less complete, of all remorse after the accomplishment thereof."

To my mind such facts give evidence of an impaired moral sense resulting from non-developed or degenerate nerve centres.

It is no more difficult to accept the belief that brain development in the evolution of mind may stop short of completely unfolding the moral faculties, than it is to believe that it may, as it certainly does in many cases, stop before high intellectuality is attained; and the

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moral sense being the highest as well as the last in the gradation of mental evolution, it is the first to exhibit evidences of degeneration, which, unless checked or neutralized by some controlling influence, increases in each succeeding generation, until at length the morbid action culminates in its positive and irreparable destruction—and what then? With only a feeble moral sense, or perhaps with its total obliteration, what incentive is there in the human mind to shun wrong-doing? None at all. Man is left to battle with the storms and tempests of life without a helm or pilot to guide his frail bark to a port of safety; but, tossed about upon the angry billows of temptation, is it indeed strange if, by and by his craft is stranded on the shoals of petty crimes, or goes down to destruction in the dark, cold gloom of murder?

Evidently then, in some instances at least, criminality is not the immediate offspring of uncontrolled or vicious passion or impulse which might be restrained by an effort of the will; but it represents a symptom of physical degeneration of the nerve centres, and the perpetrated crime itself is but an outward expression of the inner condition of man's development, akin to that condition of mind which generates low and vulgar ideas having their counterpart in brutal instincts and words. In truth, it is undoubtedly connected with diseased or non-developed nerve structure in the higher centres, as is epilepsy, inebriety, pauperism or insanity, and which may be to a degree, and in some persons, remedied or modified by

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proper treatment and education; but where, as is too often the case, it results from a vice of organization incapacitated by a bad descent, from evolving sufficient moral sensibility, it then becomes an irresistible fate; the cause is in past physical antecedents, and as a sequence of this cause the criminal takes his legitimate place in human society. Yes, he is a a legitimate member of society, in that his individuality sprang from, and is correlated with, ancestral taints of character, over which he has no control; and although free under civil law to choose his following as a member of society, to shun its wrongs and hold its virtues, yet, being bound through heredity by the forces of his organization, he occupies a natural position among the vast throng of mortals whose individual acts, whether of virtue or vice, when aggregated, constitute the history of humanity.

Mr. Brockway, of the Detroit of House Correction, in a paper before the International Penitentiary Congress of 1872, says: "The species of crime to which a person is addicted depends upon the circumstances which surround him, or upon inherited tendencies, or both; but whether a man will commit crime at all depends, to a great degree, upon his constitutional characteristics." He argues the existence of moral imbecility, incoherent mental development, and feebleness of will power, and affirms that "this undeveloped state, this paralysis, as it were, of the moral faculties, though, no doubt, largely due to the want of proper early education, is often inherited from progenitors."

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Mr. Dugdale's intelligent investigations of the relations of crime, pauperism, and disease, have multiplied facts which bear testimony of the power of inheritance to establish organisms which are unable to successfully resist the temptations and evils of life.

The history of that most remarkable family line, known as the "Jukes" — extending through seven generations, and including a tabulated report of 709 individuals — furnishes abundant material for the elucidation of the relative influence of the two important factors -- heredity and environment — which influence individual life and action, and authorizes me to accept as true the statement of Dr. E. Harris, that "the criminal is a morbid product of the community, the family, and the various circumstances of daily life in which his childhood is spent. The departure downward, from virtue to vice and crime, is undoubtedly possible in the career of any youth, because the passions ungoverned, the will and conscience stupefied, perverted, or even occasionally overcome by disease—as in epilepsy, or by wrongly indulged appetites—may result in criminal as in all sorts of vicious acts. But the number of really healthy, vigorous and reasonably well-born and well-trained children who ever fall into a career of crime, is exceedingly small. Even the accidental fall of such persons admits of rescue. The habitually criminal classes spring almost exclusively from a different stock; their youthful days were spent in vicious indulgence, or amidst the degrading and blighting surroundings of physical and social defile-

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ment, with only a flickering of the redeeming and saving influence of desire and hope for a virtuous and useful life, and at the late day when the laws against crime have overtaken them and brought them before courts and consigned them to prisons, the habits of vicious thought and criminal action have acquired the strength and quality of instincts."

"Glancing at mankind as a whole, what," asks Despine, "do we see? Anomalies, monstrosities. In a physical point of view by the side of men well-formed, of robust health, of beautiful and noble forms, we find beings sickly, weak, ill-shaped, puny. Viewing men intellectually, what do we see? The same differences. By the side of men of genius, who create sciences, who produce the marvels of the imagination, which in literature and in the arts excite our enthusiasm, we find vulgar intelligences, insensible to the creations of genius and the splendors of nature, incapable of lifting themselves above the direction of their business and the material wants of life. Descending in the scale, we meet, at last, with the weak-minded, the imbecile, the idiotic. These natural imperfections, these anomalies, these infirmities, these monstrosities, which we see in the physical and intellectual world, exist also in the moral, as marked, as numerous and as varied. Just because the man is in health, because he has command of his ideas, because he reasons, because he is intellectually intelligent, it has been thought that he must be also morally intelligent."

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The error of this conclusion must be apparent to all who will give thought to the many examples in every community which bear witness that, with the existence of ideational power, there may be present a weak volitional force as well as a weakened condition of the moral faculties; or they may be altogether absent. And the absence of the moral faculties, "whether due to the fact that their precious germs, congenitally too weak to exhibit themselves spontaneously, have not been developed by a right moral education, or to the fact that the germs of these faculties are altogether wanting, constitute the saddest of the monstrosities to which the human race is subject."

Dr. Bruce Thompson, physician to the prison at Perth, Scotland, states: "that of 5,432 prisoners, he found 673 whose mental state appeared to be unsound, though they were not, according to general opinion, proper subjects for an asylum. At Perth, out of 904 convicts, 440 were recommitted, showing the terrible power which directed them, in spite of the reformatory influences which had been exerted. In a house of detention 109 prisoners came from fifty families, one family having furnished eight.

"The organic condition," says Dr. Despine, "connected with these grave moral anomalies, without being a real disease . . . has, nevertheless, a relationship more or less remote, but indubitable, with the pathological conditions of the brain, which produce the different varieties of insanity. The cases in which the children of the insane become ordinary criminals are too numerous

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not to attribute the origin of this fact to an hereditary organic influence."

Let a few facts speak the results arising from criminal organizations, and teach how difficult it is to explain these facts, independent of inherent or acquired organic conditions.

In Austria, during the years 1868, 1869 and 1870, 54 per cent. of women, and 59 per cent. of men prisoners, had been previously convicted.

In Belgium in 1872, 78 per cent. of the prisoners had served previous terms of imprisonment.

In Russia, from 60 to 70 per cent. of the sentenced prisoners are recidivists.

Italian bagnios give the interesting information that 27 per cent. relapse to criminality within the first year after discharge, 16 per cent. within two years, and 57 per cent. beyond that time. While the penitentiary convicts relapse 37 per cent. the first year, 19 per cent. the second year, and 44 per cent. after this period.

In Switzerland, the reconvicted average from 19 per cent. to 45 per cent.

The statistics of the United States, relative to recidivists, are too imperfect to admit of accurate comparison. The benefits to be derived from the conviction and imprisonment of criminals increase in proportion as penal and retributive methods of punishment give place to the more enlightened reformatory methods. This is especially so among the young who are sent to reformatory schools; the results, in the various institutions in

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this country, yielding from 60 per cent. to 75 per cent. of reclaimed juvenile criminals.

Yet, with all this there remains at least 25 per cent. of criminals, young in years, in whom the discipline, education and religious instruction, so earnestly given at the various institutions, fail to overcome the native tendencies to crime. A Jesse Pomeroy is a moral imbecile, incapable of profiting by admonition, or acting otherwise than as directed by the vicious impulses of his degenerate nature, while an "Oliver Twist," strong in the inherited virtue of a good descent, is able to withstand every temptation, and neutralize every evil influence with which a "Fagan" could environ him.

One other argument in behalf of the neurotic origin of criminality and I shall have done. It rests upon the established fact that inebriety, insanity and crime bear close relationship to, and, as results of pathological conditions of nerve tissue, are correlatives of each other.

In addition to facts and arguments already given, the following are to my mind conclusive in demonstrating that the condition of the organism influences and determines criminality. It is a fact that inebriety, insanity and criminality are hereditary, and undergo mutual metamorphosis during stages of transmission.

It is a fact that drunkenness or dipsomania is a physical disease, depending on some molecular change of nerve tissue as the direct effect of alcoholic poisoning, and the "gemmules" of this tissue, when transmitted, become active factors in the formation of character.

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Says Dr. Joseph Parrish: "I think there is a predisposition in many men to insanity and in many other men to intoxication from the same cause, just as you and I might be exposed to cold and wet and fatigue, and you may get rheumatism and I may get pleurisy."

Dr. Dodge, late Superintendent of the Binghamton Inebriate Asylum, says: "It is important to keep in view that drunkenness is as often involuntary as voluntary; that the person afflicted with the tendency to it obeys a law of his members more potent than his will. The condition of the inebriate is abnormal; he is in a state of unrest throughout the whole system, and the urgency for relief is so great that the will has no power to resist. What is denominated appetite, therefore, is a state of suffering depending upon disease, as is colic or pleurisy, and the craving and demand for relief are beyond the power of the will."

Dr. Rush reports an habitual drunkard, who, when urged to leave off drink, replied: "Were a keg of rum in one corner of a room and were a cannon constantly discharging balls between me and it, I could not refrain from passing before that cannon in order to get rum."

Macnish, in his Anatomy of Drunkenness, cites a man, to whom a friend painted the distresses of his family, the loss of his business and character, and the ruin of his health; and from whom he received the admission that all was, alas! too true; but, said he: "I can no longer resist temptation; if a bottle of brandy stood at one hand and the pit of hell yawned at the other, and if

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I were convinced I would be pushed in as sure as I took one glass, I could not refrain."

Prof. Mussey, of Cincinnati, cites a tippler who was placed in the almshouse and denied all alcoholic drinks. He tried to secure them by many devices, but in vain; till one day he deliberately placed one hand on a block and with an axe struck it off with a single blow. Then with the bleeding, mutilated arm uplifted, he ran to the house crying for rum because his hand was off; it was brought, and after first plunging the bleeding member into the bowl, he drank from it freely, exclaiming, "Now I am satisfied!"

Certainly this is evidence of will paralysis, or at least of an impulse more powerful than will, and I therefore accept as an established fact that inebriety results from morbid physical conditions which determine abnormal appetites too potent to be controled by a will which is in a state of partial or complete paralysis. This condition furnishes a numerous progeny of criminals, as is attested by statistics from nearly every civilized nation, being at least as high as 75 per cent. of the total number who take rank under this head. Dr. Elisha Harris places it as high as 85 per cent., and says: "The most mournful fact that humanity could present was presented by the development that this condition of criminality and drunkenness was almost universally an inheritance." If, then, inebriety is a physical disease, causing such a large proportion of criminal acts, are we not authorized to affirm that the acts perpetrated are but peculiar ex-

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pressions of the physical vice? It is an admitted fact that inebriety in the parent predetermines insanity in the offspring.

Lord Shaftesbury, Chairmain of the English Committee on Lunacy, reported that six out of ten of the insane became so though the direct or indirect result of alcohol.

The late Dr. Howe, of Massachusetts, found that out of 300 idiots, 145 descended from intemperate parents. While Dr. Maudsley affirms that, next to inheritance, inebriety is the most potent factor in the production of insanity.

Again, it is generally known and admitted that insanity predisposes to crime, and it is also known that physical conditions largely preponderate in the causation of insanity; and since inebriety and insanity are, either directly or through inheritance, the controling elements in producing criminality, the conclusion is, to me, irresistible, that a mutual relation of a physical character is established among the three.

It has been my endeavor to show the existence in man of an actual and potential inequality depending on molecular differences of nerve structure which is handed down from parent to offspring, giving each individual a personal capacity which, though capable of being modified by acquirements of education and influences of environment, determines with much accuracy the intellectual and moral character which is to be. I have noted the inheritance of individual peculiarities, whether per-

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ceptional, ideational, emotional or volitional; and have also cited examples illustrative of the heredity of morbid conditions, and demonstrated the mutability and interchangeableness of pathological states. It has been shown that nerve energy only exists within the boundaries of nerve structure, and that it varies in expression only when there is a variation in the nerve tissue; this applies to every form of nerve energy, whether it be a simple sensation or the exhibition of thought, reason and will. The moral sense has also been shown to depend on the physical organism, and the manifestation of its phenomena to be influenced by whatever causes induce change of texture in the supreme centres of emotional life.

Is it not, then, an important question to ask relative to man's acts in life, and does not conviction follow after duly reflecting upon the complex nature of the problem to be solved, and the countless number and variety of elements which, as factors, make up the grand total of human life, that ere judgment is given upon any case of criminality, passion and prejudice should be eliminated and manhood exalted by giving reason empire over emotion; holding steadily and firmly the scales of justice, which, on the one side, hold the act committed, and on the other, the organization which impelled the crime, and only by the proper balancing of which can right be vindicated or justice measured to man.

Criminals belong to us as a legitimate inheritance, and are exponents of our civilization; their crimes, like insanity, varying and assuming different forms under

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different stages of social evolution. The doctrine that crime can be diminished through fear of punishment is erroneous, as criminal statistics abundantly demonstrate. Were crime the result of personal spontaneity this might be true; but since it springs from the secret forces of organization, and is but a symptom of moral alienation resulting from an inherited vice of character, over the origin of which the possessor had no control, how can he, in the name of common sense, do differently than he does? Nay, he cannot; his acts are as the "chastity of impotency, or the silence of the mute, a necessity." He who has no moral faculties cannot be held responsible for moral wrong-doing, and he who is morally dead through the vice of an inherited nature is absolutely beyond the jurisprudence of penal retribution.

Can you arrest upon the verge of the precipice the mighty torrent of Niagara? No; you may, perhaps, far up the river, divert its waters into other channels; but undisturbed, its flow is ever onward, constantly gathering force and accumulating wrath, until at length, with maddening rage, it plunges over the giddy heights into the seething abyss beneath! You cannot arrest it unless you can dry up the sources which produce it, and this is beyond human power. Neither can you arrest the onward course of the criminal, whose crimes represent the final and terrible explosion of accumulated ills in past generations. To prevent crime, therefore, is impossible, because the sources from which it springs, the streams which feed it, are intimately united with indi-

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vidual life and social progress, and it is as much beyond human power to regulate and adjust individual and social life, as it is to prohibit the clouds from forming and dropping rain upon the earth.

I shall not now discuss the question of treatment best adapted to criminals, but will say only this: that, however small the hope of success may be, it is clearly our duty to endeavor to reform, rather than punish; to educate and elevate, rather than depress and increase the ignorance of the mind. Our efforts will be limited in good results by the individual capacity of each to receive and assimilate mental food, but it is nevertheless our duty to make an earnest, honest trial. The more youthful, the more impressible the mind and the greater the hope of reward; and with special endeavor should we therefore labor with the young, yielding to no discouragement, but pressing on with earnestness, assiduity and hope, stimulated by the fact that, though the progress be slow and the gain but small, yet they impress favorably the succeeding generation, and, by and by, through the aggregation of many small gains, may be built up a perfect individual and society.

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THE MEDALS OF GUISLAIN.

BY DR. H. R. STORER,
Corresponding Member of the Medico-Legal Society,
Foreign Associate of the Royal Numismatic Society of Belgium.
Newport, R. I.

READ BEFORE THE MEDICO-LEGAL SOCIETY, OCTOBER 14, 1887.

In his interesting memoir of Joseph Guislain, THE MEDICO-LEGAL JOURNAL (June, 1887, pp. 124, 129), though describing the statue of the illustrious alienist that stands in the Salon des Beaux Arts at Ghent, Dr. Jules Morel neglected to mention the equally suggestive medallic souvenirs that chronicle his early career, and consecrate his memory. A brief description of them may therefore have its value towards a completion of the biography in question, showing as they do, Guislain's high ambitions as a youth, his intense application to his studies, his very exceptional success therein, and the extensive intellectual foundation then laid, upon which were based the triumphs of his maturity.

The medals of Guislain are nine in number. The first seven of them commemorate his academic honors; the ninth his mortuary.

1. *Obverse.* Within the field, the staff of Æsculapius and a branch of laurel, forming the cross of St. Andrew. Inscription: ÉCOLE DE MÉDECINE DE GAND 1816.

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Reverse. Inscription : CLASSE D'ANATOMIE ET DE PHSYIOLOGIE—PREMIER PRIX REMPORTÉ PAR JOS. GUISLAIN.

Bronze, enamelled. 45 millimetres.

Hippolyte Kluyskens. Des hommes célébres dans les sciences et les arts, et des médailles qui consacrent leur souvenir, Ghont, 1859, I., p. 399, no. 3.

2. Obverse as preceding.

Reverse. Inscr : CLASSE DE PATHOLOGIE INTERNE—PREMIER PRIX, etc., as in the preceding.

Metal and size as the last.

Ibid., I., p. 399, no. 4.

3. Obverse as preceding.

Reverse. Inscr : CLASSE DE CHIRUGIE (sic)—PREMIER PRIX, etc , as in the preceding.

Metal and size as before.

Ibid., I., p. 399, no. 5.

4. Obverse as preceding, save that the date is 1817.

Reverse. Inscr : IV PRIX DE CHIMIE ET BOTAN DÉCERNÉ A J. GUISLAIN.

Metal and size as before.

Ibid., I., p. 399, no. 6.

5. Obverse as the last.

Reverse. Inscr : IV PRIX DES ACCOUCHEMENS DÉCERNÉ A J. GUISLAIN.

Metal and size as before.

Ibid., I., p. 399, no. 7.

This medal had escaped my notice when preparing my monograph upon the medals, jetons and tokens illustrative of Midwifery and the Diseases of Women (*N. E.*

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Medical Monthly, Nov. and Dec., 1886), although I enumerated others of similar character that had been conferred by the city and University of Ghent. Like the four preceding, it was engraved by Amand De Bast.

6. *Obverse.* Minerva, before an altar, placing a crown upon the brow of a youth. To the left SIMON G. DU ROI. Legend: HONOS ALIT ARTES. Exergue: UNIV (ERSITAS). GANDAV (ENSIS).

Reverse. Inscr: J. GUISLAIN IN CERTAM. LITERAR. ERUDITIORIS JUVENT. BELGICAE VICTORI DOCTRINAE PRAEMIUM 1819 (Engraved).

Gold. 35 mm.

Ibid., I., p. 398, no. 1.

7. *Obverse.* Bust of the King of Belgium, to the right. Beneath, BRAEMT FECIT. Inscr: GUILLAUME PREMIER ROI DES PAYS-BAS.

Reverse. Inscription, entwined with two laurel branches: SOCIÉTÉ ROYALE DES BEAUX-ARTS A BRUXELLES. Upon the edge, ACCESSIT D'ARCHITECTURE. JOSEPH GUISLAIN DE GAND. 1874.

Bronze, silvered. 50 mm.

Ibid., I., p. 399, no. 2.

8. *Obverse.* Bust, facing, in professorial robe, with the cross of the Order of Leopold.

Reverse. Inscr: JOSEPH GUISLAIN | NÉ A | GAND | LE II FÉVRIER | MDCCXCVII.

In Kluysken's description a comma is inserted after the name, but as it does not appear upon his plate of the medal, I presume it was an error. In the description

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the dates are both given in Arabic instead of Roman numerals, while in the plate the first E of FÉVRIER is unaccented.

Gold. 40 mm.

Ibid., I., p. 399, no. 8. fig.

The portrait upon the obverse, the die of which was cut from nature by Ch. Onghena, is strikingly like that of Van Enaeme's bust of Guislain illustrated in the June number of the Society's Journal. A painting of him adorns the hall of the Society of Medicine at Ghent.

9. Obverse as preceding.

Reverse also, save with the addition Y MOURUT LE I AVRIL 1860. (This is in accordance with Kluysken's description, but I presume that the date is in reality in Roman rather than Arabic numerals).

Gold. 40 mm.

Kluyskens. Numismatique médicale belge, p. 27 (Livre Jubilaire, publié par la Société de Médecine de Gand, 1885, 8°).

By a strange oversight, not a single medal of Guislain is mentioned by Dr. C. L. von Duisburg of Dantzic (C. A. Rudolphi recentioris aevi numismata virorum de rebus medicis et physicis meritorum memoriam servantia, etc., Dantzic, 1862, 8°; Supplementum I, 1863; Supp. II. 1868), or by Dr. E. Rüppell of Frankfurt-on-Main (Beitrag zur Kenntniss der numismatischen Erinnerungen an Aerzte und Naturforscher die sich nicht in Duisburg's Werk über diesen Gegenstand vorfinden, Vienna, 1875, 8°;

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Medaillen auf Aerzte und Naturforscher, Vienna, 1876, 8°), though their works were all published subsequently to that of Dr. Kluyskens of Ghent, in 1859, to which reference has been given, and to Guislain's death.

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THE MEDICAL JURISPRUDENCE OF INEBRIETY.

BY CLARK BELL, ESQ., OF THE NEW YORK BAR.

President of the Medico-Legal Society of New York.

READ BEFORE THE MEDICO-LEGAL SOCIETY OF NEW YORK, NOVEMBER 9th, 1887.

In a discussion like that proposed before the Medico-Legal Society, in which the question is to be considered by such able medical men from the medical side or standpoint, it has seemed to me that it would be of interest to both professions, as well as to laymen, to have the inquiry made as to those relations which attach by law to inebriety, as well in the civil and domestic relations of the inebriate, as in regard to crimes committed by persons, while acting under the influence of intoxicants or while in a state of intoxication.

What, then, is the present legal status of the question?

I shall briefly state (but have neither opportunity nor space to discuss), what I believe to be the law upon the subject; citing and grouping authorities the civil side first, and the question of criminal responsibility second.

I.—CIVIL RELATIONS.—1. *Intoxication* was regarded by the common law, when complete and characterized by unconsciousness, as a species of insanity. Lord Coke's

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4th manner of "*non compos mentis*" was, "4. By his own act as a drunkard."*

Delirium tremens, which results directly from habits of intoxication, is in law considered to be a form of insanity, and this has been repeatedly held by the courts.†

It has always been a well-settled rule of law that no person can make a contract binding upon himself while he is wholly deprived of his reason by intoxication. This would be true as to deeds, wills, all instruments and obligations of every kind.‡

This rule is not changed where the intoxication was not procured by the other party to the contract, but is voluntary on the part of the drunkard.§

By the common law, as well as by the New York Statute, a testator must, at the time of the execution of a will, be of "*sound mind and memory*," and it is as requisite to have the presence of a "*disposing memory*," as a "*sound mind*." ‖

(*b.*) By common law and by statute law an intoxicated person is thereby rendered incompetent as a witness.

* Coke Litt., 248, a; Beverly Case, Coke. 124; Buswell on Insanity, § 295.

† Macconchey *v.* The State, 5 Ohio St. 77; Carter *v.* The State, 12 Tex. App., 500; Buswell on Insanity, § 158; Erwin *v.* State, 10 Tex., 700.

‡ Prentice *v.* Achorn, 2 Paige 30; Pitt *v.* Smith, 3 Camp., 33; Cole *v.* Robbins, Bul. N. P., 172; Morris *v.* Clay, 8 Jones (N. C.) 216; King *v.* Bryant, 2 Hayw., 394; White *v.* Cox, 3 Hayw., 78: Buswell on Insanity, § 393.

§ Wigglesworth *v.* Steers, 1 Hen. & Man., 70; Barrett *v.* Buxton, 2 Aiken 167.

‖ N. Y. Rev. Stat., art. 2, chap. 6; Parr 2, § 20, 5th ed.; Forman's Will, 54 Barb., 274; Van Guysling *v.* Van Kuren, 35 N. Y., 70; Aiken *v.* Weekerly, 19 Mich., 482; Lowder *v.* Lowder, 58 Ind., 588; Converse *v.* Converse, 21 Vt., 168.

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The statute law usually classifies such intoxicated persons as lunatics, and the provisions frequently apply similarly to each, and to both.*

(*c*) In the marriage contract, which in some cases is treated on different grounds from all other contracts, from the necessity of the case, and consequences upon consummation, the sound general rule has been: that if the party was so far intoxicated as not to understand the nature and consequences of the act, this would invalidate the contract.†

2. The analogy between lunacy and total intoxication, or even habitual drunkenness, is doubtless most marked in the statutes of the various states regarding the care and custody of the person and estates of lunatics, idiots and habitual drunkards.

(*a.*) By English law the Lord Chancellor, as the direct representative of the Crown, has always exercised the right of assuming the custody and control of the persons and estates, of all those who, by reason of imbecility or want of understanding, are incapable of taking care of themselves.

Writs *de lunatico inquirendo* were issued in cases to inquire whether the party was incapable of conducting his affairs on account of habitual drunkenness.

The Supreme Court of every American State would doubtless have the right which the Court of Chancery exercised under the law of England in the absence of

*N. Y. Rev. Statutes; Genl. Stat. Minn., 1878, c. 78, § 9, subd. 1; Connoly v. Lynch, 27 Minn., 435.

† Johnston *v.* Browne, Ferg. Const. Law Rep., 229.

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any statute law. This must be so in the nature of things in American States; the principle has been exercised and adjudicated on in Kentucky, in Maryland, Illinois, Indiana and North Carolina.*

The Legislatures of the various States have vested this power by statutory enactments in various tribunals, for example in New York, by the old law in the chancellor; in New Jersey in the Orphans' Court; in South Carolina equally to the law and equity side of the courts, and now in New York, where the distinction between law and equity has been abolished, in the Supreme Court, which exercises it.

It will be observed that in many of the American States the habitual drunkard even, is classified and treated under the same provisions, and in the same manner as the lunatic and the idiot, notably in Pennsylvania, New Jersey, Maryland, Illinois, New York and many other States.

Taking New York as a fair illustration of the principle, it has been held by the courts, that all contracts made by habitual drunkards who have been so adjudged in proceedings *de lunatico inquirendo* are actually void.† And that the disability of the habitual drunkard continues after the committee has been appointed even when he is perfectly sober and fully aware of the nature and consequences of his acts.‡

* Nailor *v.* Nailor, 4 Dana, 339; Colton in re, 3 Md. Ch., 446; Corrie's Case, 2 Bland's Ch., 448; Tomlinson *v.* Devore, 1 Gill., 345; Dodge *v.* Cole, 97 Ill., 338; McCord *v.* Ochiltree, 8 Blackf., 151; Lathan *v.* Wiswall, 2 Ired. Eq., 294.

† L. Amoureaux *v.* Crosby, 2 Paige, 422.

‡ Wadsworth *v.* Sharpsteen, 8 N. Y., 388.

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It has also been held that *habitual drunkenness*, being established, it is *prima facie* evidence of the subject's incapacity to manage his affairs.*

We may then assume, in considering the medical jurisprudence of inebriety, that the law has always regarded and treated intoxication as a species of mental derangement, and has considered, and treated the habitual or other drunkard, as entitled to the special care and protection of Courts of Equity in all matters relating to his civil rights, his domestic concerns, his ability to make contracts, his intermarrying, and disposing of his property, by deed, gift or devise.

The law has gone farther, for it has thrown around him, its protecting arm and shield, when it is satisfied, that he has become so addicted to drink, as to seriously interfere with the care of his estate, and the courts have then come in and taken absolute control, of both person and estate of drunkards, in their own interest and for their presumed good.

Medical men should keep in mind the distinction running all through the law between insanity and irresponsibility. The medical view, that irresponsibility should follow where insanity exists, has nowhere been conceded by the law, and this distinction must be borne in mind in the subject here under consideration.

II.—CRIMINAL RELATIONS.—This brings us to the second question: The relation of the inebriate to the criminal law for illegal acts, committed while intoxi-

*Tracy in re, 1 Paige, 580; 1 Rev. St. (2d ed.) Ch. 5, tit. 2, § 1.

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cated, which seems more harsh in its practical effect, than the principles which govern him in his civil and social relations, to society and the State.

This seeming hardship, however, is due to the capacity of the drunkard, considered objectively, for wrong-doing. In the one case his position as a civil agent is that of a unit of society merely—one who is, as it were, to be "saved from himself"; in the other case, the criminal aspect of the drunkard, it is the weal of society which is to be conserved and protected.

1. That form of intoxication which results in the total or partial suspension of or interference with, the normal exercise of brain function, is regarded at law as mental unsoundness and sometimes amounts to a species of insanity. It has been held at law, to be a voluntary madness, caused by the wilful act of the drunkard, and the decisions have been uniform that where reason has been thus suspended, by the voluntary intoxication of a person otherwise sane, that this condition does not relieve him from the consequences of his criminal acts, or, more carefully stating it, from acts committed by him in violation of law, while in that state.*

(*a.*) There are decisions which go to the length of holding, that the law will not consider the degree of intoxi-

* Kenney *v.* People, 31 N. Y., 330; 27 How., 202; 18 Abbott, 91 Lonergan *v.* People, 6 Park., 209; 50 Barb., 266; Freery *v.* People, 54 Id., 319; People *v.* Porter, 2 Park., 214; People *v.* Fuller, Id., 16; People *v.* Wildey, Id., 19; Dammaer's Case, 15 St. Pr,, 522; Frost's Case, 22 St. Tr., 472; State *v.* Toohey, 2 Rice Dig. (S. C.) 105; People *v.* Rogers, 18 N. Y., 9; State *v.* Thompson, Wright, 617 (Ohio); Swan *v.* The State, 4 Humphy., 136; Com. *v.* Hawkins, 3 Gray, 463 Mass.); Cluch *v.* State, 40 Ind., 264; State *v.* Thompson, 12 Nev., 140

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cation, whether partial, excessive or complete, and even that if the party was unconscious at the time the act was committed, such condition would not excuse his act; and, in some cases, judges have gone so far, as to instruct juries that intoxication is actually an aggravation, of the unlawful act rather than an excuse.

But the better rule of law now undoubtedly is, that if the person, at the moment of the commission of the act, was unconscious, and incapable of reflection or memory, from intoxication, he could not be convicted.

There must be motive and intention, to constitute crime, and in such a case the accused would be incapable from intoxication of acting from motive.†

(*b.*) The reasons upon which the rule of law rests may, with great propriety, be considered, and should be carefully studied. before any attempt at criticism is made.

1. The law assumes that he who, while sane, puts himself voluntarily into a condition, in which he knows he cannot control his actions, must take the consequences of his acts, and that his intentions may be inferred.‡

2. That he who thus voluntarily places himself in such a position, and is sufficiently sane to conceive the

* People *v.* O'Connell, 62 How. Pr., 436; People *v.* Robinson. 1 Parker Cr. Rep., 649; Rex *v.* Carroll, 7 C. & P., 145; Dammaer's Case, *supra*; Frost's Case, *supra*; State *v.* Thompson, *supra*; United States *v.* Forbes, Crabbe., 558; Blk, Com., 26; 1 Coke, 247.

† Buswell on Insanity, § 446, note 6; People *v.* Rogers, 18 N. Y., 9, Denio; Cluck *v.* State, 40 Ind, 264; Kenney *v.* People, 31 N. Y., 330.

‡ People *v.* Garbutt, 17 Mich., 9; Commonwealth *v.* Hawkins, 5 Gray, 463.

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perpetration of the crime, must be assumed to have contemplated its perpetration.*

3. That as malice in most cases must be shown or established to complete the evidence of crime, it may be inferred, from the nature of the act, how done, the provocation or its absence, and all the circumstances of the case.†

In cases when the law recognizes different degrees of a given crime, and provides that wilful and deliberate intention, malice and premeditation must be actually proved to convict in the first degree, it is a proper subject of inquiry whether the accused was in a condition of mind to be capable of premeditation.‡

Sometimes it becomes necessary to inquire. whether the act was done in heat of passion, or after mature premeditation and deliberation, in which the actual condition of the accused and all the circumstances attending his intoxication, would be important as bearing upon the question of previous intent and malice.§

(*c.*) The New York Penal Code lays down with precision the provision of law governing the question of responsibility in that State as follows :

§ 22. *Intoxicated persons.*—No act committed by a

* People *v.* Robinson, 2 Parker cr., 235.

† Buswell on Insanity, § 450 ; Buswell *v.* Commonwealth 20 Grat.

‡ Buswell on Insanity, § 450 ; Hopt *v.* People, 104 U. S.; Penn *v.* McFall, Addison, 255 ; Keenan *v* Com., 44 Penn. St., 55 ; State *v.* Johnson, 40 Conn., 136 ; Harte *v.* State, 11 Humph., 154, and cases cited in note to Buswell on Insanity, § 450.

§ Kelly *v*, Commonwealth, 1 Grant (Pa.) 481 ; Patte *v.* The State, 9 Hupmh., 668.

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person, while in a state of intoxication, shall be deemed less criminal by reason of his having been in such condition. But whenever the actual existence of any particular purpose, motive or intent is a necessary element to constitute a particular species or degree of crime, the jury may take into consideration the fact that the accused was intoxicated at the time, in determining the purpose, motive or intent with which he committed the act.

(*d.*) Voluntary intoxication, though amounting to a frenzy, has been held not to be a defense when a homicide was committed without provocation.*

(*e.*) *Delirium tremens*, however, a condition which is the result of drink, and is remotely due to the voluntary act of the drunkard, has been held to be a defense to acts committed while in the frenzy, similar to the defense of insanity.†

(*f.*) It has been held that when inebriety develops into a fixed and well-defined mental disease, this relieves from

*People *v.* Rogers, 18 N. Y., 9 (reversing 3 Pack., 632); Kenny *v.* People *v.* 31 N. Y., 330; People *v.* Robinson, 1 Pack., 649; 2 Id., 235: People *v.* Hammil, id., 223; People *v.* Batting, 49 How., 392; People *v.* Eastwood, 3 Park., 25; 14 N. Y., 562; State *v.* Harlow, 21 Mo., 446; Shanahan *v.* Conn., 8 Bush, 463; Rafferty *v.* People, 66 Ill., 118; Charci *v.* State, 31 Ga., 424; Humphreys *v.* State, 45 Id., 190.

Real *v.* People, 55 Barbour, 551; 42 New York, 270; Willis *v.* Com., (Va.), 22; Albany Law Journal, 176; Maconhey *v.* State, 5 Ohio, § 77; Carter *v.* State, 12 Tex. Ap., 500; Buswell on Insanity, § 158; Erwin *v.* State, 10 Tex., 700.

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responsibility in criminal cases, and such cases will be regarded and treated as cases of insanity.*

(*g.*) It may now be regarded as a settled rule that evidence of intoxication is always admissible, to explain the conduct and intent of the accused, in cases of homicide.†

(*h.*) In crimes less than homicides, and especially where the intent is not a necessary element to constitute a degree or phase of the crime, this rule does not apply.

The practical result, however, in such cases, and in those States where the latter provision of the New York Penal Code has not been adopted, is to leave this whole subject, to the judges, who fix the details of punishment. This is a great public wrong, because each judge acts on his own idea, and one is merciful and another harsh. If it is placed by law in the breast of the judges, it should be well-defined and regulated by statute. Lord MacKenzie well says: "The *discretion* of a judge is the law of tyrants."

3d. It will be observed that the law has not yet judicially recognized inebriety as a disease, except in the cases of delirium tremens—above cited—and hardly even in that case.

It is for publicists, judges and law-makers to consider the claim now made, that science has demonstrated inebriety, to be a disease.

*Lonergan *v.* People, 6 Park., 209; 50 Barb., 266; O'Brien *v.* People, 48 Barb., 274; People *v.* Williams, 43 Cal., 344; U. S. *v.* Drew, 5 Mason, 28; State *v.* McGonnigal, 5 Harling., 510.

†Lonergan *v.* People, 6 Park., 209; 50 Barb., 266 · People *v.* Hammil, 2 Park., 223; People *v.* Rogers, 18 N. Y., 9.

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If this is conceded, what changes are needed to modify the law, as it at present stands, so as to fully preserve the rights of society, in its relation to the unlawful acts of inebriates, with a proper and just sense of the rights of the inebriate himself?

This contribution is made from the legal standpoint purely, and is designed merely to open this interesting discussion for both professions, to which such names as Dr. Norman Kerr, Dr. T. D. Crothers, Dr. Joseph Parrish, Dr. Charles H. Hughes, Dr. T. L. Wright and others will contribute the medical view, a discussion which I hope may arrest the thoughtful attention of the students of the subject throughout the world.

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*SOME MEDICO-LEGAL ASPECTS OF INEBRIETY.**

By Norman Kerr, M. D., F. L. S., London.
Corresponding member Medico-Legal Society.

Consulting Physician Dalrymple Home for Inebriates. President Society for the Study of Inebriety.

Some English judges have held that drunkenness is no excuse for crime, while others have ruled that drunkenness is an aggravation, as was the law of ancient Sparta. In an exceptional case the ruling, however, was exoneration of punishment, on the ground that the inebriety was virtually insanity. Our various contradictory judgments taken as a whole, however, indicate, that by the general existing interpretation of English jurisprudence, the sobriety or insobriety of the accused, has little or no influence on the punishment.

That this legal ruling is unfair and unjust in many cases, few who are acquainted with the diseased condition, and abnormal mental state of many inebriates, will deny.

There are practical difficulties in the way of a plea for inebriate irresponsibility on the ground of disease, as this plea might be greatly abused; but a mixed commission

**Read before the Medico-Legal Society of New York, Nov. 9, 1887.*

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of lawyers and medical experts in inebriety would, I feel confident, be able to discriminate certain forms of inebriety, which should fairly be held to be exempt from responsibility.

For example, there are many inebriates, the absence of whose power of control, has not been occasioned by their own default. There are persons born into the world with an innate susceptibility to narcotic and anæsthetic action. If they so much as taste any intoxicant, their whole organization is, as it were, set on fire without their consent. It may be urged that if they have once experienced this narcotic conflagration, they are blameworthy if they again "touch, taste or handle" the intoxicating cup. But on the first indulgence in the (to them) "forbidden fruit" they had no suspicion, they were perfectly innocent of danger. These had no control, over their inborn narcotic susceptibility. I respectfully suggest to the mixed commission which I have indicated, that crime committed by such subjects of this delicate susceptibility to narcotic influences, should, for a first offense at least, be leniently considered.

The same consideration applies to another numerous class of inebriates who have not been endowed from birth with narcotic sensitivity, but who have been handicapped from their mothers' womb, by a narcotic diathesis, a defective nervous and mental organism, or a deficiency of inhibitory power, which makes it extremely difficult to resist the potent influence of a neurotic anæsthetic, and renders them an easy prey to alcohol, opium, chloral, or

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other inebriety. Yet these had no control over the too scanty stock of mental force, with which they were from the first supplied.

Is it just, is it equitable, that these heavily weighted individuals, should be judged by the same standard as their stronger and more healthy born fellows?

There are two forms of inebriety which ought clearly to exempt from criminal responsibility, viz.: the inebriety of insanity, and the insanity of inebriety.

In the inebriety of insanity, where the inebriate manifestation is the unmistakable product of an insane impulse, a crime committed in this drunken state, is the act of a person of unsound mind, for which he is no more responsible, than for a similar criminal act, done in the absence of narcotics. In such cases the drinking or other narcotic indulgence is simply a phase of recurrent insanity. Drinking here is not the cause, but the effect of mental unsoundness. These cases are by no means rare, and it is a miscarriage of justice, when such a madman is punished merely because he was intoxicated, when he committed the offense.

By the insanity of inebriety, I mean specially alcoholic insanity, that state of permanent or apparently permanent mental alienation, which has been induced by long-continued, excessive indulgence in alcoholic intoxicants. If any one is deranged, whatever the cause of the derangement, he is now mentally unsound, unable always to discriminate between right and wrong, or to control his actions. That alcohol has been the *fons et origo* of the

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lunatic condition does not affect his present state. He is now unsound in mind, and must, in justice, be held free from penal procedure.

In addition to these phases of insanity and inebriety, about which there can be little difference of opinion, there are other phases on which there are conflicting opinions. There is "*delirium tremens*," for instance, in an attack of which, crime is sometimes perpetrated. I have again and again seen patients, undoubtedly insane for the time quite unconscious of their actions, dead to all perception of right and wrong, and incapable of reasoning. I have seen a criminal act, in this insane condition, prevented only by force, the patient having no recollection of the circumstances on reason returning. What good purpose can be served by holding this deliriate accountable for his deeds? On what sound legal plea can he be thus arraigned?

The same observation applies to "*mania a potu*," during the fits of which disease the patient is literally "beside himself." He is indeed a maniac for the time, utterly beyond his own control. The paroxysms of "*mania a potu*" greatly resemble outbreaks of epileptic mania. The explosion is similar in appearance, the whole man being overwhelmed and overborne, in a tornado of convulsive madness, the only difference in many cases being that, the seizure is in one alcoholic, and in another non-alcoholic. Why should the one be exempt from criminal responsibility, and not the other?

It may be urged, both in "*delirium tremens*" and "*mania*

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a potu," that the person would not have been mad, had he not partaken of strong drink. This is not absolutely true, as I have occasionally seen similar and (but for the absence of alcohol) undistinguishable insane paroxysms in the person of the abstemious, from inherited inebriety. But if it were absolutely true, there are many who are so constituted, that if they drink at all, they drink to madness. Temporary insanity is the penalty, of their breach of total abstinence practice. If such should be punished at all, it should be, not for drunken madness which they cannot avert, if they only taste the (to them) maddening potion, but for DRINKING AT ALL. But if the subject of inherited inebriety, is to be punished for tasting a maddening intoxicant, which will provoke a paroxysm, so ought a gouty subject, for indulging in a glass of port.

These will suffice as examples of cases in legal medicine, requiring careful reconsideration.

It may be granted by some that an alteration in the law is justified, yet contended that in suitable cases, there should be a plea for mitigation of penalties, where a diseased inebriate condition is established. But this would be of little value, though an improvement. Punishment is no cure, for the disease of inebriety. Treatment is called for, and the wiser plan would be to consign the diseased inebriate to a curative institution, for a period long enough, to afford a reasonable hope of cure. If incurable, the insane inebriate criminal, should be permanently secluded, where he cannot be provoked by a narcotic excitant, to a paroxysm of maniacal criminality.

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There are other medico-legal questions of deep interest, bound up in the jurisprudence of inebriety. The inebriate is deprived of his civil capacity in some countries, and rightly so. How unjust to allow the validity of a will whereby an inebriate has cut off his wife from succession, so far as he could do so, simply because like many a lunatic he has embodied a passing morbid hatred of her, whom he loved with the purest affection. She, poor woman, may have denied herself, for his and their childrens' sake, in order to secure his residence in a home where he may be restored to his right mind; and, while his inebriate madness continues, he therefore harbors a grudge against her.

But my time has expired. These suggestions are respectfully submitted to the Medico-Legal Society at the request of my honored friend, the president, Mr. Clark Bell, as a contribution to an enquiry of high import, to not a few physically and mentally diseased victims, of a jurisprudence based, not on modern science, but on our former ignorance, of the pathological nature of many forms of inebriety and insanity.

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*THE MEDICAL JURISPRUDENCE OF INEBRIETY.**

By Anthony R. Dyett, Esq.,
of the New York Bar.

Medical Jurisprudence, sometimes called Legal or Forensic Medicine, or, as the Germans have it, State Medicine, may be called a composite science. It is neither law nor medicine, but a happy union of these sister sciences, to aid the former in the administration of justice.

And when we speak of the Medical Jurisprudence of Inebriety, we refer to the application of that science to the subject of drunkenness.

To understand and illustrate this, we should first ascertain the effect of drunkenness when it is an element either of criminal offences or civil rights.

As to crimes:

The commission of crime is often the attendant upon and the consequence of drunkenness. We find it laid down by Plowden as early as the reign of Edward VI. (1548), that if a person, while drunk, kills another, this shall be felony, and he shall be hanged for it, though he did it through ignorance, being occasioned by his

* Read before the Medico-Legal Society, November 9, 1887.

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own act and folly, and he shall not be privileged thereby. The same doctrine is laid down by Coke in the Institutes, where he calls a drunkard a *voluntarius dæmon*, and says that drunkenness doth aggravate the crime. (3 Thomas' Coke, 46.)

And Lord Mansfield said, in the celebrated case of the Chamberlain of London against Evans, in the House of Lords, in 1767, that a man shall not be allowed to plead that he was drunk in bar of criminal prosecution, though incapable of the exercise of reason, because drunkenness itself is a crime; and he shall not excuse one crime by another. It is a legal maxim "that a man shall not disable himself."

And this is the law of this State, as declared by the Court of Appeals as late as 1865, in People v. Kenny, 31 N. Y., 330, following a previous decision in People v. Rogers, 18 N. Y., 9.

When, however, the law of murder in our State was altered so as to require *deliberation* as well as premeditation to constitute murder in the first degrees, punishishable by death, it was held that even voluntary intoxication, if so great as to render *deliberation impossible*, reduced the crime to murder in the second degree, which required only an *intent to kill*.

(People v. Batting, 49 How. Pr. Rep., 392, decided in 1874.)

By our Penal Code of 1876, section 22, it is enacted as follows: "No act committed by a person while in a state of voluntary intoxication, shall be deemed less

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criminal by reason of his having been in such condition. But whenever the actual existence of any *particular purpose, motive or intent* is a necessary element to constitute a particular species or degree of crime, the jury may *take into consideration* the fact that the accused was intoxicated at the time, in determining the *purpose, motive or intent with which he committed the act.*"

As to injuries to the person or property of others, either by negligence or wilful act, for which a civil remedy is sought, if the wrong-doer be drunk *simpliciter*, he is liable for all damages by his acts, including exemplary damages. If insane *in consequence* of drunkenness, he is like all other insane persons, liable only for actual or compensatory damages.

(Krom v. Schoonmaker, 3 Barbour, 647.)

As to wills:

In Peck v. Carey, 27 N. Y., p. 9, the decedent, whose will was there sustained, had for years before his death been a confirmed drunkard and scarcely ever sober; he had more than once had delirium tremens; while crazed with drink he had repeatedly sought to put an end to his existence, and his efforts had finally proved successful.

After commenting upon these facts, Denio, C. J., pronouncing the opinion of the Court, said: "It is not the law that a dissipated man cannot make a contract or execute a will, nor that one who has the habit of excessive indulgence in strong drink must be wholly free from its influence when performing such acts;" and he added that such acts would be valid and effectual in spite

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of such influence, unless the testator were so much intoxicated that his brain was incapable of performing its proper functions, and he was therefore *temporarily insane,* or unless a fixed mental *disease* had supervened upon his intemperate habits.

As to contracts, the general rule, as laid down by Professor Parsons in his work on Contracts (Vol. 1, 5th ed., 384, and Vol. 3, page 416, *et in notis*) is, that the intoxication of the defendant, at the time of entering into the contract, is no sufficient defense, unless the plaintiff purposely procured or caused that intoxication and took advantage of it.

But *total* drunkenness, or a degree of intoxication *depriving the party of the use of his reason,* avoids any contract, whether at law or in equity.

And in the case of Burns v. O'Rourke, 5 Robt., N. Y. Superior Court Reports, page 649, it was held that partial intoxication at the time of executing an instrument, in order to avoid its obligations, is not sufficient, unless some circumstances of fraud or undue influence are added. The intoxication must be *so complete as to deprive the party of the use of his reason.*

Of course if *mania à potu* or *delirium tremens* has ensued as a *consequence* of the intoxication, the contract is absolutely void, as it is then the act of a person *insane* or *non compos mentis.*

But, as in the case of contracts of all insane persons, if the contract be made in good faith without fraud or knowledge of the insanity by the other party, and the

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defendant has received any property under or benefit from the contract, it will be enforced so far as to compel *the return of the property or compensation for the benefit.*

Canfield v. Fairbanks, 63 Barbour, 461; Riley v. Alb'y Sav. Bank, 86 Hun. 513, 519; Johnson v. Stone, 35 Hun., 380, 383; Mut. Life Ins. Co. v. Hunt, 79 N. Y., 541.

Having thus briefly shown the effect of inebriety, the application of Medical Jurisprudence to the subject is readily perceived.

Witnesses who are skilled in any art or science may not only testify to facts, but to their opinions, as experts, because such witnesses are supposed, from their experience and study, to have peculiar knowledge upon the subject of inquiry, which jurors generally have not and to be more capable therefore than the latter of drawing conclusions from facts.

But a layman can testify only to facts within his own knowledge and observation, tending to show the soundness or unsoundness of another's mind; and, although he may characterize as rational or irrational the acts and declarations to which he testifies, his testimony must be limited to his conclusions from *the specific facts he discloses*, and he is not competent to express an opinion on the general question whether the mind of the person was sound or unsound.

Clapp v. Fullerton, 34 N. Y., 190, 194.

The same principle applies to cases of drunkenness *simpliciter* and insanity in consequence of it.

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Medicine here becomes an invaluable ally of law in determining by the evidence of physicians, diagnostically, the extent of the inebriety, and how far in the given case it has affected the brain and mind of the patient, and whether it has progressed so far as to have developed insanity, as *mania à potu* or *delirium tremens*, or any other of its Protean forms, while without its aid all that could be proved by laymen would be that by his talk and acts the person in question *appeared* to be drunk.

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*THE STATUS EBRIETATIS IN OUR COURTS.**

By C. H. Hughes, M. D.
Corresponding Member Medico-Legal Society; Editor Alienist *and* Neurologist, *St. Louis, Mo.*

By common consent, the inebriate in relation to his normal environment, like the lunatic, is conceded to be out of harmony. Intoxication extenuates improper conduct in popular judgment, when that conduct is not extremely criminal in its character. So that, while inebriety by common consent modifies the popular verdict, upon conduct at variance with law and propriety in minor degree, actions highly criminal in appearance find no excuse for crime, because of the inebriety of their perpetrator. This unequal judgment is made, not because essentially there is nothing in inebriety that modifies and perverts the natural will, but because it is deemed unsafe to society, to concede to inebriety an excuse for crime, or unlawful misdemeanors, and this chiefly because the condition of inebriety, may be voluntarily induced, and a state of alcoholic irresponsibility might be assumed and simulated for criminal and other unlawful purposes. But the fact exists and remains that a con-

* Read before the Medico-Legal Society, November 9, 1887

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dition of the brain may be induced by alcohol, both voluntarily and involuntarily, in which the normal brain volition and natural impulses are changed, and at variance with the natural character—a diseased condition of the brain, chiefly and most directly in its circulation, but underlying that in its most minute organization.

There are inebriates who cannot help being such. They are victims of a neuropathic endowment bequeathed by a neurotic and unstable brained ancestry, who come into the world dowered with a heritage which as certainly and fatally leads to inebriety, under slight injudicious indulgence, as in other branches of the same neuropathic family, the more palpably seen and undubitably recognized forms of nervous disease, such as epilepsy and mania, are developed from slight causes, which would not in more fortunate individuals have brought into view anything abnormal.

This latent neuropathic heritage which, in the one case determines an inebriate, in the other a lunatic an epileptic or a paralytic, should be taken account of as an accessory before the fact at least, (and in this case contrary to legal precedent), should exempt, in a measure, the victim, whose crime is only possible because of the overpowering influence of this antecedent neuropathic accessory. In this case the accessory is the tyrant-principal.

The law, it is clear, in every case of inebriate misdemeanor, should go behind the police records and look into the neurological history, and discover, if possible, the ancestral and immediate organic factors which may mod-

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ify or make impossible full responsibility, by fettering or preventing the normal volition. The will can not be free though it may appear so, *prima facie*, in an individual so tyranically endowed that he cannot pass a saloon with out entering in to take a drink, even though in doing so he violates all the proprieties of life, his own previously formed resolutions and his highest interests.

There are, undoubtedly, elements of disease in inebriety, as there are elements of crime in it. It should be the duty of the law, instead of regarding its victims always as criminal, when they are arraigned for crime or misdemeanors, to inquire diligently how much is crime and how much disease; how much are the natural character and inclination changed by overpowering and non-preventable disease, and to what extent might the disease have been averted.

Here the intelligence and self-knowledge of the individual as to his organic make-up, should become a lawful question, as I believe it should in every question of mental derangement or mental soundness.

A toxhæmic influence, powerful enough to produce indurative changes in the brain, to harden the albumen of the tissues, and produce cerebral sclerosis and peripheral neuritis, as well as the more immediate vaso motor paralyses and consequent vascular disturbances of the brain and other viscera, cannot be, and ought not to be, ignored when the normal functioning of the organ affected by it, whether stomach, liver or brain, is in question. Where immediate physical aberration does not

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follow alcoholic toxhæmia, it may follow and is apt to appear in a succeeding generation. The alcoholism of one generation may be, and often is, the insanity or epilepsy of the next, or *vice versa*.

The record of neuropathic decadence due to alcohol, as given by *Morel* and confirmed by all observations since, should convince us without the necessity of further illustrative example here, that the volitional impairment and psycopathic and other neuropathic perversions of alcohol, as patent significance and worthy of judicial consideration as the recognized crime and vice it engenders. Alcohol entails disease of the brain as certainly as it vitiates morals and fosters vice.

It is certainly a very imprudent kind of jurisprudence that takes legal account of the one class of effects, and does not recognize the other.

As I write this note, I have in mind the unvoluntary criminal record, of a young man of otherwise reputable family, who is now serving a life sentence for the automatic alcoholic murder of a dear relation, murdered incidentally and accidentally, and, I believe, as stated by the young man, not consciously, whose home, beginning with the germinal life in his mother's womb, was in a bed of alcohol, whose conception proceeded from and was consummated by a chemically alcoholized father and mother, who became himself a periodical drunkard in early boyhood, and an involuntary matricide at twenty. The Governor, in view of the extenuating circumstances of this unfortunate young man's birth and

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hereditary environments, justly, we think, commuted his sentence, for only the Great Omniscient, who knows the frame of such un ortunates, and considereth the unseen elements that so modify responsibility in the organic potency of impossible hereditary morbid endowment, could determine the exact extent of this young man's guilt.

The history of the O. Z. family, as detailed by me in the Alienist and Neurologist, Vol. III. No. 4, is but a sample of a class of cases continually obtruding themselves upon the attention of the Neurologist, to mould and modify his convictions, at variance with the commonly promulgated view of the law, that the inebriate is always responsible for his conduct, and sometimes held as doubly responsible, because both of his intoxication and its sequence. Unlike the Law, sound Neurology and Psychology would inquire into the pre-determining organism, and the responsibility of the criminal for the organic conditions, if any, which may have pre-determined the apparent crime.

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MEDICAL EXPERTISM.

By A. Wood Renton, LL.D., of London.

If the science of medical expertism had never outgrown the tricks and conceits of infancy, if it still wore the old parti-colored robe of ignorance and superstition, and believed firmly in "succubes" and "incubes," and all the other unclean spirits and mysteries which brood over and around the literatum of witchcraft, it could hardly be more profoundly distrusted than it is at this day alike by lawyer and layman.

Of this phenomenon various explanations are offered. Medical advocates of the hysterical order, see in it only another illustration of judicial blindness, and ostentatiously compare the forensic exposure of their own absurdities, to the persecution of Galileo. To the grim school of Alderson and Rolfe, the degradation of medical expertism is sufficiently accounted for by the false enthusiasm and arrogance of its representatives. Such recrimination, however, merely scotch the difficulty, and intensify the bitterness, which they fail to explain. The disrepute into which medical expertism has fallen is not to be explained away by the hasty imputation of partisanship, or even by the omnipotence of a

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retainer. Like every disease of the body physical, or the body social, it has a history. In our early law the medical expert's position appears to have been that of a scientific assessor, and not a partisan. But, as civil procedure became gradually inquisitorial, the judge was looked upon as a state-arbiter merely, whose sole function was to hear, and decide between, the respective cases set up before him. The rules of evidence became rigid; the position of counsel was well defined; and the recognized license of the bar to sum up all that can be said in favor of a given proposition, and ignore everything that can be said against it, was extended by a false analogy to the medical witness. Under this operation of these influences, the scientific assessor, slowly gave place to the medical advocate. The new science embraced with ignorant and passionate devotion the theory of responsibility in mental disease, generated by the French alienists in the electric atmosphere of the Revolution. Pinel's, "moral insanity," instead of being restricted to the rare cases, marked by the congenital absence, the arrested growth, or the sudden and total pervertion of the moral sense, was decked out in rhetorical and exaggerated language, and plead in defence of every morbid appetite and brutal crime. Whenever the arm of justice was raised to strike, the expert plucked her sleeve, and sought to prevent the blow. It seemed as if the sanction of science was to be given to the prayer of the Arabian prophet — "Oh! God! be kind to the wicked; to the good thou hast been sufficiently

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kind in making them good!" Against this apotheosis of viciousness, the people arose in stern and healthy revolt, and insisted that if moral insanity, *thus interpreted*, was a disease, it must be cured on the treadmill or, the scaffold. From its fatal alliance with French alienism, medical expertness has never recovered. Inheriting the traditions of its ancestry, the legal profession has never honestly acknowledged, the splendid services which medical advocacy, has rendered to science, and humanity has failed to detect the residuum of truth, which undoubtedly underlies the *observations* of Pinel, and has unworthily meted out to Taylor and Maudsley the strictures which were not wholly undeserved by Pagan and Ray. The wings of counsel have indeed been somewhat shorn since the insolent question—"Upon your solemn oath, sir, and in the face of the profession, do you persist in swearing so and so?"—was considered indispensable to an effective medico-legal cross-examination; but the medical witness has still imputed to him, not only the full weight of his actual transgressions, but the original lines of presumptiousness and partisanship which are held to have descended to him by professional generation.

Now the remedy for this state of things, though necessarily radical, is neither complicated nor perilous. Let us get rid of the notion that an oath adds anything to the value of the truth of scientific opinion. How is it possible to prosecute for perjury, a doctor, who swears that he *believes* certain symptoms to be referable, not to

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poisoning, but to disease? Who shall prove the *mens rea* in such a case? Then if an oath adds nothing to the weight, does cross-examination add anything to the truth of scientific testimony? Let the history of medical expertism, from its false diagnosis of the symptoms of Sir Thomas Overbury to its unseeming struggle for the life of William Palmer answer the question. The cross-examination of a medical witness, especially if he has the misfortune to be "a mad-doctor," usually presents a scene which might well make "the angels of research and meditation," who are fabled to stand by the side of science, veil their faces with their wings, and weep. Having once clearly grasped the fact that the proper platform for the medical expert is the bench, and not the witness box, we may easily adjust all difficulties of detail. The right of either party to any civil cause, or criminal prosecution, to support his case as heretofore, by independent expert evidence may be left unaffected. The judge or jury need not be *legally* bound to adopt the opinion of the scientific assessors, unless he or they concur in it, provided that the assessors by expressing their opinion in open court are enabled to exercise an effective *moral* check, upon the bench or tribunal. The remuneration of the assessors may be fixed by the court; for a medical man is bound, for a valuable consideration, to employ in the service of the State, that professional skill, of which more than the protection of the State he enjoys a practical monopoly.

I annex the draft of a measure, applicable to the

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United Kingdom, by which I think that it is possible to restore and renovate the earlier procedure, for whose premature disuse we have so dearly paid.

The Medical and Chemical Assessors' Act, 1888.

Be it enacted, etc., as follows:

1. This Act may be cited as the Medical and Chemical Assessors' Act, 1888.

2. In the interpretation and for the purposes of this Act, the following terms shall have the respective meanings hereinafter assigned to them, that is to say—

"Medico-legal issue" shall mean any issue arising upon the trial of any civil cause or criminal prosecution for the determination of which the evidence of medical or chemical experts may be deemed necessary.

"Judge" shall mean any person or persons invested by law with judicial authority, before whom in the lawful exercise of such authority any Medico-legal issue may arise.

"Registrar" shall include any person who acts in the capacity of a Registrar to any judge as herein before defined.

3. The provisions of this act shall apply to the United Kingdom of Great Britain and Ireland.

4. Upon the commencement of this Act, the Lord Chancellor of England, the Lord President of Scotland, and the Lord Chancellor of Ireland, shall proceed forthwith in the manner hereinafter described to appoint only qualified medical and chemical assessors within their respective jurisdictions. The Lord Chancellor shall ap-

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point twenty-four medical and twenty-four chemical assessors for England and Wales; the Lord President and the Lord Chancellor of Ireland shall each appoint twelve medical and twelve chemical assessors for Scotland and England respectively.

5. Every assessor so appointed shall receive notice in writing of his appointment, and every such appointment shall be for the period of three years from the date of such notice.

6. At any time before, or during the trial of any civil cause or criminal prosecution, the judge may require the Registrar to summon to his assistance not less than three medical or three chemical assessors. Every assessor so summoned shall be bound to attend and assist the judge in the manner hereinafter provided, shall receive for his services such fee [not less than five guineas a day, or for any part of a day,] as the judge may direct, and shall be liable to a penalty not exceeding £5 for every disobedence, at the discretion of the court. The Judge may also allow to any medical or chemical assessor such sum for traveling and incidental expenses as may be deemed reasonable under the circumstances.

7. The fee of every assessor under this Act shall be payable out of the county rates.

8. It shall be the duty of every assessor summoned to and attending the trial of any civil cause or criminal prosecution to answer any questions put to him by the judge, and to express in open court his opinion with reference to any medico-legal issue that may arise, or may have

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arisen, therein; but the judge, or in cases tried with a jury, the jury shall not be bound by the opinion of any one, or of a majority of such assessors, unless he or they concur in it.

9. Nothing in this Act contained shall take away or prejudice the right of, or part, to any civil cause or criminal prosecution to support his case, as heretofore, by the evidence of medical or chemical experts.

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EDITORIAL.

Definitions of Insanity and Tests of Criminal Liability of the Insane.

Supreme Court of Alabama. Somerville, J.

The inquiries to be submitted to a jury in every criminal trial when the defense of insanity is interposed are these :—

1. Was the defendant, at the time of the commission of the alleged crime, as matter of fact afflicted with a *disease of the brain* so as to be idiotic or otherwise insane ?

2. If such be the case, did he know right from wrong, as applied to the particular act in question ? If he did not have such knowledge, he is not legally responsible.

3. If he did have such knowledge, he may nevertheless not be legally responsible if the two following conditions concur :

(1.) If. by reason of the duress of such mental disease, he had so far lost the *power to choose* between the right and wrong, and to avoid doing the act in question, as that his free agency was at the time destroyed.

(2.) And if at the same time the alleged crime was so connected with such mental disease, in the relation of cause and effect as to have been the product of it *solely*.

(The rule laid down in McNaughten's Case before the English House of Lords commented on and declared *not* to be the law, and the dicta in Boswell vs. State, 63 Ala. 307 overruled.

Parsons v. State, Dec. Term 1886. (July 1887.)

Hoffbauer,—

"An individual is insane when the understanding is diverted or changed in its operations ; when he is powerless to avail himself of his intellectual faculties, or to make known his wishes in a suitable manner."

(Untersuchungen uber die Krankheiten der Seile. Halle 1808, p. 11.

Guislain,—

"Insanity is a chronic disease, free from fever, in which the ideas and the acts are under the control of an irresistible power, a change taking place in the manner of feeling, conceiving, thinking, and acting, peculiar to the

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individual in his character and in his habits; a state which contrasts with the sentiments, the thoughts and the acts of those about him; an affection which renders it impossible for him to act so as to provide for his preservation, and with a sense of his responsibility to God or to society." "Lecons orales sur les phrenopathies etc." Gand. Paris, 1880. 2nd Edition, vol. 1st., p. 52.

THEO. H. KELLOGG, M. D.,—

"Insanity is a manifestation of a functional or organic disease of the brain."

"Insanity in its essential manifestations consists in the abnormal action of mental functions, either singly or in their co-ordinated relations to one another."

PROFESSOR GILMAN,—

"Insanity is a disease of the brain by which the freedom of the will is impaired."

(The Relations of the Medical to the Legal Profession, p. 20.)

DR. THOMAS K. CRUSE,—

"Insanity is a psychic manifestation of brain disease."

(A new definition of insanity. Journal of Phychological Medicine, April 1872, p. 267.

NOAH WEBSTER,—

INSANITY—INSANENESS.—The state of being unsound in mind; derangement of intellect; madness.

Insanity is chiefly used, and the word is applicable to any degree of mental derangement, from slight delirium or wandering, to distraction.

It is, however, rarely used to express slight temporary delirium, occasioned by fever or accident.

In his Table of Synonyms, he groups :—INSANITY, LUNACY, MADNESS, DERANGEMENT, ALIENATION, ABERRATION, MANIA, DELIRIUM, FRENZY, MONOMANIA, DEMENTIA.

Insanity is the generic term for all such diseases. *Lunacy* has now an equal extent of meaning, though once used to denote periodical insanity. *Madness* has the same extent, though originally referring to the rage created by the disease. *Derangement, aberration, alienation,* are popular terms for insanity. *Delirium, mania* and *frenzy*, denote excited states of the disease. *Dementia* denotes the loss of mental power by this means. *Monomania* is insanity upon a single subject.—(Webster's Dictionary.)

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JOSEPH THOMAS, M. D.,—

INSANITY. (Lat. *Insania, Insanitas, dtis* from the same.) (Fr. *Folie*, Ger. *geisteskrankheit*, "Sickness of the mind.") Deranged intellect; Madness or lunacy. (Thomas' Medical Dictionary).

POPE, thus describes the insane:—

"Unnumbered throngs on every hand are seen
Of bodies changed to various forms by spleen;
Here living tea-pots stand, one arm held out
One bent, the handle this, and that the spout;
A pipkin there like HOMER'S tripod walks
Here sighs a jar, and there a goose pie talks."

DR. PRITCHARD,—

"*Moral Insanity* consists in a morbid perversion of the feelings, affections and active powers, without any illusion or erroneous conviction impressed upon the understanding sometimes co-existing with an apparently impaired state of the intellectual faculties." (Pritchard, on Insanity.)

DR. BURROWS, describing senile madness, says:—

"It is a species of moral insanity. The moral feelings are perverted and some of the passions in a state of excitement. The 'pious' become 'impious;' the content and happy, discontent and miserable; the prudent and economical, imprudent and ridiculously profuse; the liberal, penurious; the sober, drunken. Passions which had long been dormant, resume their sway, and cast shame, mingled with pity, over the years of declining age." (Burrows on Insanity).

CHARLES KNIGHT,—

Insanity is a general derangement of the intellect, presenting many varieties and degrees, the distinguishing character of which is. that the faculties of the mind generally are disordered; the patient will not speak on any subject long, without betraying the defect of his reasoning power, this will in one person merely lead to strange irrational conduct and conversation its necessary consequences; in another it will be attended with loud and violent raving (mania); in a third there will be singing, and a gay cheerful air: while a fourth case will be characterized by a low muttering incoherence.

It is most frequently attended with disturbance of the bodily health, the symptoms of mental excitement frequently increase in violence for a short time, these gradually subside into a more quiet state, which too often terminates the mental imbecility (English Cyclopedia, p. 87.)

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CHAMBERS' ENCYCLOPEDIA,—

Insanity means all unhealthiness of the mind. It consists according to one opinion in such disorganization, or degeneration of the nervous structure, as to render the exercise of reason impossible, according to another it consists in disorder of the reason itself; and according to a third in perversion or destruction of the soul, or the moral part of our nature.

The prevailing view of physiologists is that insanity is a symptom or expression, manifested through the functions of the nervous system of physical disease.

The legal term "*Lunacy*" represents only those deviations from that standard of mental soundness, which is universally recognized, although difficult of definition, in which the person, the property, or the civil rights may be interfered with.

NEW AMERICAN ENCYCLOPEDIA (Appleton's),—

(Lat. *Insanitas* from *in* privative and *sanus* sound healthy) in general terms an unsound or diseased condition of the mind.

Many attempts have been made to define insanity, but with very problematical success.

* * * * * * * * *

Perhaps Dr. Bucknills definition (unsoundness of mind in relation to criminal acts) "a condition of the mind in which a false conception or judgment, a defective power of the will, or an incontrollable violence of the emotions, and instincts have separately or conjunctly been produced by disease," though somewhat awkward comes sufficiently near the truth.—(vol. 9, p. 540.)

LEGAL CRIMINAL RESPONSIBILITY OF THE INSANE,—

Apropos of this question, the most important and interesting event of the year, is the decision of the Supreme Court of Alabama, in the case of Parsons vs. the State, squarely holding that, the *dicta* of the Judges in the McNaughtan case, making the knowledge of right and wrong, the test; is no longer good law in Alabama because at variance with the progres of science, and against the civilization and intelligence of our time.

JUDGE HENRY M. SOMERVILLE,—

We give some extracts from a letter received from Judge Somerville, in regard to the question of the criminal responsibility of the insane.

TUSCALOOSA, Ala., Sept. 29, 1887.

CLARK BELL, Esq., 57 Broadway, New York.

Dear Sir: I send you by to-day's mail a pamphlet copy of a very recent

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opinion of our Supreme Court on the subject of the "Rules of Legal Responsibility in Criminal Trials of Insane Persons." I have submitted it to my esteemed friend, Dr. P. Bryce, at present Superintendent of the Alabama Insane Hospital, in this city, and, after fully indorsing it, he has suggested to me the propriety of sending it to you for publication, criticism, or such other disposition as you may see fit to make of it.

The courts have heretofore been far behind the medical profession in keeping abreast with the advances of science in subjects of medical jurisprudence. It is important, in my humble judgment, that the two professions should harmonize on all such matters, if possible. One purpose of the opinion sent you is to make a beginning in that direction, somewhat more emphatic in tone and elaborate in effort, than has yet been done, perhaps, by any one of our State Courts. If the position be correct, the Medico-Legal journal of the country can do much to give it stability and currency. If unsound, the sooner it is refuted the better.

The case will be reported in the 81 vol. Ala Reports, p. 577, as shown by advance sheets of that report, but will not be out for about two months.

Yours very truly,

H. M. SOMERVILLE.

DR. P. BRYCE,—

We take pleasure in publishing extracts from a letter received from this distinguished alienist, which is one of the many tributes paid this journal from eminent alienists and scientists throughout the world:

SUPERINTENDENT'S OFFICE,
ALABAMA INSANE HOSPITAL,
TUSKALOOSA, ALA., Nov. 15, 1887.

CLARK BELL, ESQ.,

Dear Sir: I send you by this mail a printed copy of the decision of the Supreme Court of Alabama in the case of Parsons vs. the State.

You will observe that Judge Somerville (who is a trustee of this hospital) is fully abreast with the progress made within the past few years in the jurisprudence of insanity, and that this opinion of his, marks a new era in that department in Alabama.

Allow me, while writing, to congratulate you upon the success of the MEDICO-LEGAL JOURNAL. I have taken it from the beginning, and note a steady improvement in every number. It is one of the most readable journals I get.

The article on Criminality, in the last number, promises to be one of the most instructive papers that has appeared in any print for a long time. It strikes the right key so far, and I hope may go on to show the complete dependence of mental and moral traits upon physical organization. This

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will do away with the metaphysical fallacy of a *"free will"* and places our criminal jurisprudence on a strictly scientific basis. It must lead up, too, to radical reform in our methods of dealing with criminals of all classes, including idiots and lunatics, and do away with the confusion that from time immemorial has mystified our courts and jurors.

Very sincerely yours,

P. BRYCE, Supt.

PRIZE ESSAYS.

Members should not forget that the Medico-Legal Society has announced three prizes for the best essays on any subject connected with Medical Jurisprudence. The first of $100; the second best essay $75, and the third best $50. The papers must be sent to the President of the Medico-Legal Society on or before April 1, 1888. While the prize is open to all the world the writer must apply for membership in the Medico-Legal Society if not already an Honorary, Corresponding or Active member. It invites competition from every member of the body, and it is to be hoped that the entries will be large. We have received so many inquiries with regard to our prizes from students of the science, that we re publish in this number of the JOURNAL the prize announcement.

PRIZES FOR ESSAYS ON MEDICO-LEGAL SUBJECTS.

The MEDICO-LEGAL SOCIETY OF NEW YORK announces the following prizes for original essays on any subject within the domain of medical jurisprudence or Forensic Medicine:

1. For the best essay—ONE HUNDRED DOLLARS, to be known as the ELLIOTT F. SHEPARD PRIZE.

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2. For the second best essay—SEVENTY-FIVE DOLLARS.

3. For the third best essay—FIFTY DOLLARS

The prizes to be awarded by a commission, to be named by the President of the Society, which will be hereafter announced.

Competition will be limited to active, honorary and corresponding members of the Society at the time the award is made.

It is intended to make these prizes open to all students of Forensic Medicine throughout the world, as all competitors may apply for membership in the society, which now has active members in most of the American States, in Canada and in many foreign countries.

All details of the award will be determined by the Executive Committee of the Medico-Legal Society of New York.

The papers must be sent to the President of the Medico-Legal Society of New York, on or before April 1, 1888, or deposited in the Post Office, where the competitor resides on or before that day.

The name of the author of any paper will not be communicated to the Committee awarding the prizes.

All persons desiring to compete for these prizes will please forward their names and address to the President or Secretary of the Medico-Legal Society of New York.

In case the essay is written in a foreign tongue, it should be accompanied by a translation into the English language.

It is hoped that all our members, whether active, honorary or corresponding, will take an interest in this effort to stimulate scientific inquiry and research in questions relating to medical jurisprudence.

Scientific societies in all countries are invited to lay

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this announcement before their members, and the co-operation of the legal, medical and public press, is respectfully solicited in bringing the subject to public attention.

CLARK BELL, *President*,
57 Broadway, N. Y.
ALBERT BACH, *Secretary*,
140 Nassau St., N. Y.

We also add:

1. While no limitation is made, we should advise that it should be not less than 10 pages nor more than 50 pages in length.

2. It should be accompanied by a *motto* and the name and address of the writer, and a copy of the title of paper and the motto should be sent to the President of the Society, Mr. Clark Bell, who will not communicate them to the committee.

THE MEDICAL JURISPRUDENCE OF INEBRIETY.

The contributions by such a number of prominent names in the list of both active and corresponding members of the Medico-Legal Society, to the discussion upon this topic inaugurated at the November meeting and continued at the annual meeting, indicates the important position, which it now occupies in the public mind. It has been suggested that the various papers read, and which may follow, with the discussion they have elicited, would, if published as a brochure in a cheap form, reach a great number of readers. The Publication Committee and the publishers of this JOURNAL have the subject under consideration, and if sufficient encouragement is given by members or subscribers, will bring out the work, which would be a volume of about 200 pages, by some 20 or 25 writers. The cost to subscribers will be: Cloth,

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50c. ; paper, 30c. Members or others desiring copies will forward their names and number subscribed for to this journal.

The Executive Committee of the Medico-Legal Society have recommended the publication of the various papers read before that body upon this subject, with the discussions thereon, in a separate volume.

The articles will appear in this journal as fast as we have space at our disposal.

The number and character of these papers, the wide range taken, and ability shown in the discussion, by so many observers, in the several professions represented in the Society, must excite the attention of thoughtful minds, on both sides of the Atlantic, to a subject of universal interest.

If the recommendation of the Executive Committee is carried out, and these papers published as a volume at popular prices, it would not only well reward the enterprise of the publisher, but would bring the valuable labors of the Medico-Legal Society upon this subject into immediate and general recognition.

Medico-Legal Society of France.

This body elected Mr. Clark Bell an Honorary member at its November Session of 1887.

Dr. Jules Socquet, one of the Secretaries has been elected a Corresponding member of the Medico-Legal Society of New York, upon his application. Dr. Socquet has won distinction in France as the pupil of Brouardel.

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Medico-Legal Society of New York.

We give the list of officers elected at the annual meeting in December. They will be installed at the January meeting of 1888:

For President,
Clark Bell, Esq.

For 1st Vice-President,
W. G. Stevenson, M. D.

For 2nd Vice-President,
Ira Russell, M. D.

For Secretary,
Albert Bach, Esq.

For Asst. Secretary,
Clark B. Augustine, Esq.

For Corresponding Secretary,
Morris Ellinger, Esq.

For Treasurer.
S. N. Leo, M. D.

For Librarian,
Charles F. Stillman, M. D.

For Asst. Librarian,
E. W. Chamberlain, Esq.

For Curator & Pathologist,
The. H. Kellogg, M. D.

For Chemist.
C. A. Doremus, M. D.

For Trustees,
Charles Milne, M. D.
Richard B. Kimball, Esq.

For Perm. Commission,
Judge John R. Dillon,
Stephen Smith, M. D.

Medico-Legal Prize Essays.

We trust that the Legal, Medical and general press will give wide publicity to the prizes offered by the Medico-Legal Society of New York. The Society desire it brought to the notice of the legal and medical professions throughout the world, and to the Law and Medical faculties of the various colleges and universities, the student's of Law and Medical schools, to excite competition among all students of the science throughout the world.

1. The essays, when sent, should be accompanied by an envelope containing the name and address of the writer, the title of the paper, and the motto of the essay, if one is used.

2. No prize will be awarded by the Committee upon any essay unless it is clearly mentioned and thought deserving of a prize upon its merits.

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We republish herewith the announcement made in our last number:

MEDICO-LEGAL PAPERS, SERIES 4 AND 5.

We are able to announce that an arrangement has been completed for the publication of series or Vol. IV. of these papers during the coming year, 1888.

Members of the Society, subscribers to the JOURNAL, and all others who have not subscribed for these volumes will kindly send their names and address with the number of volumes they desire.

We announce the following additional subscriptions since our last issue: Dr. Wm. Landau, Berlin, Germany, two copies, cloth; C. H. Blackburn, Esq., Cincinnati, Ohio, one copy, cloth; Dr. Ira Russell, Winchester, Mass., one copy, cloth; Dr. S. C. Johnson, Hudson, Wis., one copy, cloth.

We trust that members generally who have not subscribed will send in their names at once.

The Medico-Legal Society at the annual meeting instructed the Committee of Publication to take steps to publish series 4 and 5 of the Medico-Legal papers, and has ratified a contract for the publication made by the Executive Committee of the Society. The Society has arranged with a publisher who will commence the work at once upon Series 4. The President has announced as Committee on Publication for Series 4 and 5 of Medico-Legal papers.

W. G. STEVENSON, M. D., *Chairman*; Clark Bell, Esq.; R. S. Guernsey, Esq.; R. B. Kimball, Esq.; F. C. Valen-

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tine, M. D.; Chas. S. Fischer, M. D.; Amelia Wright, M. D.

The following is the present subscription list:

MEDICO-LEGAL SOCIETY.

The undersigned hereby subscribe for and agree to take of the Medico-Legal Society, or its assigns, the number of copies of Medico-Legal Papers, Series 4 and 5, to the commencement of MEDICO-LEGAL JOURNAL, at the price of $3.50 per volume in cloth, or $2.50 in paper, provided at least sixty copies are subscribed for.

Dated January, 1887.

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C. H. Blackburn, Esq., Cincinnati, Ohio,	1	"	Cloth.
Dr. S. C. Johnson, Hudson, Wis.	1	"	Cloth.
Dr. Ira Russell, Winchester, Mass.	1	"	Cloth.
Dr. Wm. Landau, Berlin	2	"	Cloth.

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The original papers, which will be included in these volumes, include articles by the following persons:

Dr. C. R. Agnew,
Dr. George M. Beard,
Dr. Wooster Beach,
Clark Bell, Esq.,
Dr. A. N. Bell,
Ernest H. Crosby, Esq.,
D. C. Calvin, Esq.,
Geo. B. Corkhill, Esq.,
C. A. Doremus, M.D.,
Wm. G. Davies, Esq.,
Prof. R. Ogden Doremus,
Max F. Eller, Esq.,
Dr T. C. Finnell,
Dr. Albert H. Gihon,
Dr. Wm. A. Hammond,
Dr. R. R. McIlvaine,
Dr. Moreau Morris,
Dr. J. J. O'Dea,
Dr. R. J. O'Sullivan,
Prof. W. J. Owen,
Dr. J. C. Peters,
C. W. Palmer, Esq.,
O. H. Palmer, Esq.,
Dr. R. L. Parsons,
Dr. Stephen Rogers,
Dr. Frank Ramsay,
H. S. Rokenbaugh, Esq.,
D. S. Riddle, Esq.
Dr. Henry Raphael,
Dr. Ed. Sanders,
Dr. Graemme M. Hammond,
Harry Hakes, Esq. M. D.,
Prof. F. H. Hamilton,
A. G. Hull. Esq.,
Dr. J. G. Johnson,
Dr. A. O. Kellogg,
Ed. J. Loring, Esq.,
Dr. S. N. Leo.
Dr. Chas. A. Leale,
Dr. E. C. Mann,
Dr. Edward Mead,
Dr. John T. Metcalf,
Appleton Morgan, Esq.,
Jacob Shrady, Esq.,
Dr. W. G. Stevenson,
William Shrady, Esq.;
Dr. C. Spitzka,
Dr. J. Clark Thomas,
Dr. S. Waterman,
Dr. J. S. Wright,
Dr. R. Withaus,
O. W. Wight, M.D.,
Dr. Chas. S. Wood,
Geo. H. Yeaman, Esq.,
and others.

The volume will contain about 500 to 550 pages, and will be embellished with portraits after the style of Series or Volume 3. The price will be in cloth $3.50, and paper $2.50.

All members of the Society, subscribers to the Journal, authors of papers, libraries and others who are willing to subscribe, will please notify the editor of this Journal of the number of copies they will take, and it is hoped that enough subscribers will be obtained at once to make at least one hundred.

A copy of this statement will be sent the authors of papers, who will be allowed to subscribe for additional copies at the reduced price, for all future subscriptions, of $3.00 cloth and $2.00 paper, if notice is at once sent the

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editor of this Journal or Mr. Albert Bach, Secretary, at No. 146 Nassau Street.

New members who desire to secure these volumes should send their names, as the edition will be small and soon out of print.

CLUBBING for other Journals with MEDICO-LEGAL JOURNAL.

See our advertising list for favorable subscriptions to desirable journals.

We shall endeavor to supply our readers, superintendants of asylums, libraries and others with the leading home and foreign journals, at reduced prices, to new subscribers to this JOURNAL.

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TRANSACTIONS.

OCTOBER SESSION.

PRESIDENT CLARK BELL IN THE CHAIR.

A regular meeting of the MEDICO-LEGAL SOCIETY was held October 12, 1887, at the Hotel Buckingham.

The minutes of the September, 1887, meeting were read and approved as read.

The following gentlemen proposed by President BELL and recommended by the Executive Committee, were unanimously elected corresponding members:

DR. G. FIELDING, Blandford, London.

EDWIN CHADWICK, ESQ., C. B., London.

DR. URQUHART, Supt. Insane Asylum, Perth, Scotland.

DR. H. RAYNER, Supt. Hanwell Asylum, Hanwell, England.

MR. ROGER FOSTER offered the following resolutions touching the death of our honored and much lamented member AARON J. VANDERPOOL, which were unanimously adopted: (The resolutions unpublished in September number 1887.)

In seconding the adoption of the said resolutions Hon. SIMON STERIN made an eloquent address.

Other members spoke feelingly of the loss sustained

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by the society by the death of so eminent a man as MR. VANDERPOOL.

The paper of the evening entitled "The Medals of Guislain," by Dr. H. R. Storer, was then read, and an interesting discussion of the same ensued.

There being no further business before the Society, it adjourned.]

ALBERT BACH,
Secretary.

NOVEMBER SESSION.

PRESIDENT CLARK BELL, Esq., IN THE CHAIR.]

A regular meeting of the Medico-Legal Society was held Wednesday, November 9th, 1887, at the Hotel Buckingham, President Clark Bell in the Chair. The minutes of the October, 1887, meeting were read and approved as read.

The following gentlemen recommended by the Executive Committee and proposed by President BELL on motion put and carried, were unanimously elected Active and Corresponding members respectively:

Active Members.

Mrs. E. M. GRANNIS, Editor *Church Union*, 33 East 22d street, New York City.

C. H. BLACKBURN, Esq., Counselor-at-Law, Cincinnati, Ohio.

WM. R. DEKRAFFT, M. D., 30 West 30th street, New York City.

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Corresponding Members.

A. WOOD RENTON, Esq., the Legal Club, Outer Temple, London, England.

Dr. WILLIAM LANDAU, Berlin, Germany.

The subject of discussion "THE MEDICAL JURISPRUDENCE OF INEBRIETY," was then taken up, President BELL calling Ex-Judge Noah Davis to the Chair pending the discussion. Papers were read on the topic by Dr. NORMAN KERR, President of the English Society for the Study and Cure of Inebriety, of London; Dr. T. D. CROTHERS, Editor *The Journal of Inebriety*, of Hartford, Conn.; Dr. E. C. MANN, of Brooklyn; ANTHONY R. DYETT, Esq., of New York, and President CLARK BELL.

The above papers were discussed by AUSTIN ABBOTT, Esq., Dr. MASON, of Brooklyn, Dr. STEVENSON and Dr. PEET.

On motion the remaining papers and the discussion of same topic was adjourned to December meeting.

President BELL then announced the death of Dr. J. M. CARNOCHAN. Remarks were made by MORRIS ELLINGER, Esq., Mr. ALBERT BACH, A. C. BUTTS, Dr. O'DWYER and Mr. FERD. P. VALENTINE.

It was moved by Mr. ELLINGER and seconded by President BELL that a committee be appointed to take such further action on the death of Dr. CARNOCHAN as they deemed commensurate with the greatness of his professional career. Carried.

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The committee appointed were President BELL, MORRIS ELLINGER and Dr. W. G. STEVENSON.

The following nominations of officers of the Society for the ensuing year were then made:

President—CLARK BELL, Esq.

First Vice-President—W. G. STEVENSON, M. D.

Second Vice-President—IRA RUSSELL, M. D.

Secretary—ALBERT BACH, Esq.

Assistant Secretary—CLARK B. AUGUSTINE, Esq.

Corresponding Secretary—MORRIS ELLINGER, Esq.

Treasurer—S. N. LEO, M. D.

Librarian—CHARLES F. STILLMAN, M. D.

Assistant Librarian—E. W. CHAMBERLAIN, Esq.

Curator and Pathologist—THE. H. KELLOGG, M. D.

Chemist—C. A. DOREMUS, M. D.

Trustees—CHARLES MILNE, M. D., RICHARD B. KIMBALL, Esq.

Permanent Commission—Judge JOHN R. DILLON, STEPHEN SMITH, M. D.

There being no further business before the Society it adjourned.

ALBERT BACH,
Secretary.

ANNUAL MEETING, DECEMBER, 1887.

PRESIDENCY OF CLARK BELL, ESQ.

The annual meeting of the Medico-Legal Society was held Dec. 13, at the Hotel Buckingham, President CLARK

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BELL, Esq., in the Chair, and Mr. Albert Bach, Secretary.

The minutes of November meeting were read and approved.

On recommendation of the Executive Committee the following gentlemen were elected Active and Corresponding members:

Active.

Proposed by Clark Bell, Esq.: Henry M. Somerville, Esq., Justice of the Supreme Court, Tuscaloosa, Alabama; J. R. M. Hearn, Esq., 234 Broadway, New York City; Dr. A. Vander Veer, 28 Eagle Street, Albany, N. Y.; T. G. Frost, Esq., Editor Columbia *Law Times*, New York City. Proposed by M. Ellinger, Esq.: Dr. L. Bergheim, 217 East 79th Street, New York City.

Corresponding.

Proposed by President Bell: Dr. JULES SOCQUET, Secretary Medico-Legal Society of France, 6 Boulevard Richard Le Noir, Paris; Dr. FREDERICK NEEDHAM, President of the British Medico-Psychological Association, Barnewood House, Gloucester, England.

The Executive Committee reported recommending that Section 2, of Article 3, of By-Laws, be amended by adding the words at end of first clause, "The dues of active members, residing out of the State of New York, shall be only $2 per annum."

The question coming up on its adoption, the chair

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ordered that it lie over one month, and be acted upon at January meeting, 1888, and it was so ordered by the Society.

The Executive Committee reported that it had authorized the President and Secretary to execute a contract for the publication of series four, Medico-Legal papers, and to subscribe and pay for 100 copies of same half in paper and half in cloth, $250, and to transfer to the publishers the subscriptions already made, or to be made, which contract provided for later publication of series five, on the same terms.

On motion, the action of the Executive Committee was ratified and approved by the Society.

President Bell called ex-Chief Justice NOAH DAVIS to the chair, to preside over the reading of papers and discussion, after naming J. H. Hammersly, Esq., R. L. Parsons, M. D., and Dr. Frank H. Ingram as tellers, to whom the Assistant Secretary delivered the sealed envelopes containing the ballots, from members who had voted.

The order was "*The Medical Jurisprudence of Inebriety.*"

The paper of Dr. T. L. WRIGHT, of Belfontaine, Ohio, was read by Dr. T. D. CROTHERS, of Hartford, Conn.

The paper of Dr. JOSEPH PARRISH, of Burlington, N. J., was read by Dr. ISAAC LEWIS PEET.

That by L. W. BAKER, M. D., was read by Mr. ALBERT BACH.

That by MORRIS ELLINGER, Esq., by himself.

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That by Rev. WM. TUCKER, D. D., of Ohio, by President BELL.

That by Mrs. M. LOUISE THOMAS, by herself.

Dr. LUCY M. HALL, of Brooklyn, presented a paper on the same topic, which she asked, by reason of the lateness of the hour, to have read by title, which was done.

The several papers were discussed, and the general subject, by Dr. IRA RUSSSELL, Dr. RALPH L. PARSONS, Dr. FRANK H. INGRAM, Dr. A. JACOBI, Dr. Dent, of the New York City Asylum; Dr. W. F. Holcombe, Dr. R. K. Paddock, of Massachusetts; Dr. Lucy M. Hall, Dr. T. L. Cleaves, Dr. A. Kallay of Carlsbad, Germany, Dr. S. Waterman and others. Judge Noah Davis then closed the debate.

The tellers reported that the following gentlemen had received a majority of all the votes cast, and were duly elected:

For President.
Clark Bell, Esq.

For 1st. Vice President,
W. G. Stevenson, M. D.

For 2d Vice-President,
Ira Russell, M. D.

For Secretary,
Albert Bach, Esq.

For Asst. Secretary,
Clark B. Augustine, Esq.

For Corres. Secretary.
Morris Ellinger, Esq.

For Treasurer,
S. N. Leo, M. D.

For Librarian.
Charles F. Stillman, M. D.

For Asst. Librarian,
E. W. Chamberlain, Esq.

For Curator & Pathologist,
The. H. Kellogg, M. D.

For Chemist.
C. A. Doremus, M. D.

For Trustees,
Charles Milne, M. D.
Richard B. Kimball, Esq.

For Perm. Commission,
Judge John R. Dillon,
Stephen Smith, M. D.

The report of the tellers was approved, and the officers declared elected.

The Committee on a Memorial to Dr. Carnochan were granted further time.

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The President announced, with deepest regret, the death of our newly elected member, Daniel R. Lyddy, of the Bar, who took great interest in the prosperity of the Society, and in the MEDICO-LEGAL JOURNAL, being a member of its Board of Trustees, and advised that the Chair be authorized to appoint a committe to take suitable action regarding the death.

The thanks of the body were tendered Judge Davis, for his kindness in presiding over the discussion.

The Society then adjourned to attend the Annual Banquet.

ALBERT BACH,
Secretary.

THE ANNUAL BANQUET.

There was an unusually large attendance at the Annual Banquet, President-elect CLARK BELL, Esq., in the Chair.

The following composed the Committee of Arrangements:

CLARK BELL, Esq., Chairman. ALFRED BACH, Secretary.

Judge W. H. Arnoux,	Col. R. G. Ingersoll,	D. Matthews, M. D.,
Isaac Angell, Esq.,	Col. E. C. James,	S. B. McLeod, M. D.,
E. W. Chamberlain, Esq.,	Judge J. H. McCarthy,	Chas. Milne, M. D.,
W. G. Davies, Esq.,	Judge Calvin E. Pratt,	J. J. O'Dea, M. D.,
Judge Jno. R. Dillon,	Simon Sterne, Esq.,	R. L. Parsons, M. D.,
Judge A. J. Dittenhoefer.	Nelson Smith, Esq.,	Seneca D. Powell, M. D.
Roger Foster, Esq.,	Alice Bennett, M. D.,	O. D. Pomeroy, M. D.,
Col. John R. Fellows,	R. O. Doremus, M. D.,	Dr. Isaac Lewis Peet,
Judge S. Burdette Hyatt,	Wm. F. Holcombe, M. D.,	Ira Russell, M. D.,
S. Hepburn, Jr., Esq.,	Theo. H. Kellogg, M. D.,	W. G. Stevenson, M. D.,
Judge Meyer S. Isaacs,	S. N. Leo, M. D.,	A. H. Smith, M. D.,
	M. J. B. Messemer, M. D.	

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SUB-COMMITTEE OF ARRANGEMENTS:

CLARK BELL, Esq., Chairman.

Chas. F. Stillman, M. D.,	M. Louise Thomas,	E. M. Mosher, M. D.,
	Robert Milbank, M. D.,	Alfred Bach, Esq., Sec'y.

Among those present, as guests, who responded to toasts were Dr. F. K. Paddock, of Massachusetts, representing the Massachusetts Medico-Legal Society; Dr. A. Jacobi, President New York Academy of Medicine; Dr. A. P. Robinson, President Bellevue Alumni; Dr. V. P. Gibney, Vice-President American Medical Association; Dr. A. Kallay, of Carlsbad; Dr. T. D. Crothers, of Hartford, Conn.; Dr. Shepherd, of Brooklyn; Dr. S. Waterman; Dr. T. A. Cleaves, of Iowa; Mrs. Emma F. Pettingill, of Brooklyn; Mrs. Martha J. Lamb; Mr. Leopold Jordan; Mrs. Alice Shaw; Dr. Grace Peckham; Judge Noah Davis, Mr. G. Jos. Hillerman; Dr. and Mrs. Gibbs and several ladies. Letters of regret were read from the President and Secretary of the Chicago Medico-Legal Society; the Medical Jurisprudence Society of Philadelphia; Dr. Joseph Parrish, whose illness prevented his attendance and who proposed a toast, and by various representatives of societies and associations who were unable to be present.

There was a large attendance of members and their wives. Speeches were made by many of the guests. Mrs. Shaw gave a recital as did Mr. Leopold Jordan. The evening was one of great enjoyment, and the occasion will be long remembered with pleasure by those who participated.

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JOHN M. CARNOCHAN.

The Committee named at the November meeting of the Medico-Legal Society, to take some appropriate action regarding the death of JOHN M. CARNOCHAN, M. D., Vice-President of the Society, have thought it would be fitting on account of the high character of the deceased, his official relation to this body and his well-known interest in its prosperity, to recommend, that instead of adoping resolutions, the remarks made by members of the Society, at the November session, be spread upon the minutes, published in the transactions in the MEDICO-LEGAL JOURNAL, and a copy sent to his widow and the members of his bereaved family, as a token of the affection and esteem in which his life, services, and memory, are held by his associates, in the Medico-Legal Society of New York.

Dated New York, December, 1887.

CLARK BELL,
W. G. STEVENSON, } *Committee.*
MORRIS ELLINGER,

President Bell, in announcing the death of Dr. Carnochan, said:

The Medical profession, American Surgery, and the Medico-Legal Society, have sustained a great loss in the sudden death of this distinguished physician.

I do not detract from any American Surgeon when I assert that the NESTOR of American Surgery is no more. The Medico-Legal Society, in losing its first vice-president, has lost one of its most brilliant and distinguished

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members, and a void is made in our ranks not easy to be filled.

Dr. Carnochan was born August 4, 1817, in Savannah, Ga. His family were Scotch, and he was educated at the High School in Edinburgh, where, after graduation, he entered the Medical University—and took his degree. He was the favorite pupil of Valentine Mott. After his return from Scotland in 1841 he entered *le Ecole de Medicine*, of Paris, where he remained six years, receiving instruction from the most eminent men of the French Capital. He was a pupil of BRODIE, of CIVALE, LEFRANC, ROUX, and VELPEAU.

In 1847 he returned to New York and commenced his career as a Surgeon, which has been second to none upon our Continent, his brilliancy of operation, delicacy and facility of touch, won for him great renown at home, and the fame of his original operations, extended to the Capitals of the Continent.

Dr. Carnochan was in charge of the Hospital for Immigrants, at Ward's Island, from its establishment in 1850, for many years. He was Health Officer at the Port of New York for two years, appointed by Governor Hoffman. He was the author of "A Treatise on the Etiology, Pathology and Treatment of Congenital Dislocation of the Head of the Femor," and since 1877 has been publishing his "Contributions to Operative Surgery," being examples from his practice for the past thirty years. He was engaged upon this work at the time of his death.

Every member will recall the interest he took in the

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work of this body and in its discussions. He contributed a paper, entitled, "CEREBRAL LOCALIZATION IN RELATION TO INSANITY," which awakened considerable discussion, and took part in many discussions, notably that upon the question of the responsibility of the insane for violations of law.

He held the position, at one time, of Chairman of the Permanent Commission of this Society, was President of the MEDICO-LEGAL JOURNAL ASSOCIATION, a member of its Board of Trustees, a shareholder, and a contributor to the fund for the prize essays, which were offered by this Society, and the last time I met him was at a banquet, at the house of our worthy Secretary; where the details of the plan were fully discussed and where he announced his intention and desire, in the Autumn, to renew it at his own table after the Summer vacation.

But yesterday I was at his funeral with Prof. Doremus and Dr. Holcombe, appointed by the chair, as representatives of this Society, and it is a source of regret that his old friend, Prof. R. O. Doremus, is not with us to-night to speak for the memory of the departed.

He was a great student and lover of Forensic Medicine. He has often expressed to me his high sense, of its great importance, and the regret he felt that it was so neglected by the Medical Schools in America, contrasting it with the favor in which it had been held in the Scotch Universities.

Dr. Carnochan, as long ago as 1850, was Professor of

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Surgery in the Medical College of the University of New York.

But it was as, the high-toned and cultured gentleman, the scholarly, charming companion and friend, that Dr. Carnochan was most prized, most loved, and will be most missed, by the lawyers, the professional and business men of the city, to whom he was endeared. He was a member of the Manhattan Club, and leaves a wife and family of five children, with a wide circle of friends, to mourn his loss.

DR. O'DWYER.—It is a very sad duty for me, to offer appropriate remarks on the death of Doctor Carnochan. I was for many years associated with him, and in fact was his pupil.

I have in my time seen some of the most eminent surgeons operate, of the hospitals in Paris, London, Edinburgh and Dublin but I have never seen any who, surpassed Dr. Carnochan in celerity, dash and originality. The celebrated Professor Valentine Mott called him his "most distinguished pupil."

Dr. Carnochan was always first in the field with any new operation in surgery, and was himself the originator of several. Though a bold and fearless operator he was careful. I well remember a desperate case involving the base of the brain, when I said to him: "Doctor, are you not going too far? 'No,' answered he, 'dangers disappear when they are encountered boldly,'" and, he finished successfully.

He was the first, and I believe the only surgeon who

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in capital operations, such as amputation of the thigh, used the anæsthetic Nitrous Oxide Gas; it being perfectly safe he strongly advocated its use.

He was kind to the poor. I have known him to spend all day and night in the Emigrant Hospital, ignoring his lucrative private practice--you, gentlemen of the legal profession, have your brilliant efforts announced broadcast and approvingly in the daily press, while the Medical profession do good, silently and unknown.

I know that Dr. Carnochan took a great interest in the success of the Medico-Legal Society. I deeply regret his death and I am sure every member of the Society deplores it also.

MR. ARTHUR C. BUTTS.—I knew Dr. Carnochan from the time I first became a member of this Society, and like all men who ever came in contact with him, I can fully say he was one of those men whom to know was to love. Like a truly great man he was simple, he was genial, therefore we did love him. I was upon one occasion a guest of his, and I shall ever treasure it as one of he most delightful evenings I ever spent. I met him elsewhere and he was always the same genial true and devoted gentleman. This Society never had any one more devoted to its interests, and although he had attained great age he was present at all its meetings, and attended all its banquets—a banquet of the Medico-Legal Society was not complete without him. I remember well when our distinguished friend, Dr. Doremus, a former President of this Society, de-

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livered his inaugural address at Bellevue Hospital. An old man walked in, trying in an unostentatious way to obtain a seat, where he would hardly be noticed, when Prof. Doremus motioned him to come where he was, in the front of the audience, and raising his hand introduced him to the young gentlemen, saying "This, young gentlemen, is Dr. Carnochan." It must have done the old man's heart good, the reception he received from these medical students. They had read of his brilliant record, they knew how he had ingrafted his name on the history of the profession, and with the enthusiasm of youth, they worshipped him as a hero. I remember again when Dr. Carnochan was eulogized by Prof. Doremus—it was probably as to one of his great and successful operations referred to by Dr. O'Dwyer. Dr. Doremus was in Berlin, and by the way, this occurrence was at Dr. Carnochan's house. He told how the German professor called the attention of the students to this operation, saying: "I want you to mark this name, I want you never to forget it; I want to hold this man up as an example to follow," and he wrote Dr. Carnochan's name upon the blackboard thus KARNOKAN. He spelled the name wrong, but the effect of that great name is indelible.

He has been followed and made an example of by the gentlemen who heard the Professor speak. I have been too long in the remarks I have made, but I think it a privilege to say I remember and will always cherish the memory of that dear friend.

MR. MORRIS ELLINGER:—It is more than thirty years

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ago when I heard for the first time the name of Dr. Carnochan pronounced from the lips of a young doctor, who came from Germany, and who did not know Dr. Carnochan, but he had heard of his name and fame in the European Universities. He spoke of him as a man who was not only eminent as an American citizen, but as a man who had already made—at that time—for himself a reputation and a fame in all European scientific circles. More than thirty years ago Dr. Carnochan was known not only as the boldest, but as the most skilful surgeon in the world, and Dr. Carnochan did not belong merely to the faculty of American medical science, he was prominent in the scientific circles of the world. He was not only great as a surgeon, he was still greater as a man, his modesty was indeed incomparable, and a few months ago I met him at the office of my friend, Julius Bien, where he was looking for plates for the work he was publishing; it was about two weeks before the meeting of the International Medical Congress in Washington, and he said to me I should like to go to that International Medical Congress, but I do not represent any scientific body; what do you think, should I go? I told him, "Doctor, if you go to that Congress you need not represent anybody but yourself, and you represent a body so large that it is not necessary to represent anything else?" And indeed he required my encouragement, the encouragement of a layman, did that great man, that great surgeon, to go to Washington. In the death of this man, not only

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this Society, but the whole body of American physicians and surgeons have sustained a loss of one of the most eminent men, a man who will be inscribed in the annals of American Surgery and in its history for all time to come, and it would be proper that some action should be taken so as to insure this inscription in the annals of this Society, and in the annals of American Surgery, and it seems to me proper that a committee should be appointed for that purpose, to prepare an inscription and some memorial of the great and eminent scientist whom we have the misfortune to lose.

MR. ALBERT BACH :—Mr. Chairman, ladies and gentlemen : In speaking of our departed member, Dr. Carnochan, my words come from the heart. They are uttered with a deep sense of gratitude for the valuable offices he has rendered me. Frequently did I ask Dr. Carnochan for information concerning theories touching questions of insanity, and in the most urbane and kindly manner did he afford me the benefit of the treasures of his remarkable mind, on the subject. He was ever ready, ever willing to give to others the choicest fruits of his labors, and his offerings were always acceptable to all who appreciated the profound in scientific research.

I have had the pleasure of entertaining Dr. Carnochan at my residence, and a more genuine man I have never met. Our Society has, indeed, sustained a serious loss by his death, and I am sure his absence from our meetings will occasion a void hard to fill.

To his family and the members of our Society I tender

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my sincere sympathy and condolence on his, much to be regretted demise.

DR. FERD. G. VALENTINE :—It was not my fortune to know Dr. Carnochan intimately, therefore I am by no means fit to appear among his eulogists—if such a man requires an eulogy.

Mr. Ellinger has just remarked that Dr. Carnochan told him he was not a representative of any society, and, therefore, had some doubts as to the propriety of his attending the Medical Congress at Washington. Coroner Ellinger aptly told him that he was entitled to attend the Medical Congress as his own representative.

This recalls to my mind a matter which may appear in bad taste to recite just now, for when death brings rest, to even so brilliant a career as was Dr. Carnochan's all rancor, all dissention, aye, all difference of opinion should cease.

Yet, as no one has said anything, of why Dr. Carnochan was not sent, to represent one of the learned bodies, I may venture to repeat what was several times discussed by us on this score. And it is with pleasure that I recall his expressing not the slightest resentment towards those who it may be said "unaffiliated" him.

It is well known that appreciating the utility of medical consultations between men who differ as to treatment, and to properly sustain the dignity of the profession, regular physicians do not, as a rule, meet irregular practitioners at the bedside.

In the days when the lines of demarcation between

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regular and irregular practitioners were more sharply drawn, and when the then code of ethics compelled patients either to give up their irregular attendant or die, Dr. Carnochan was called to a patient who was taking homœopathic doses, under the direction of an alleged adherent of that school. The services for which Dr. Carnochan were called were purely of a surgical character. He did not stop to investigate the patient's medical heresies as little as he would degrade himself or his calling, by inquiring into his religious belief, nativity or anything else.

It was a human being in suffering, and such help as Dr. Carnochan could give was called for. That sufficed for this man whose conduct as a physician and as a man should serve as a prototype for physicians and the world everywhere. He attended the patient and attended him well, I am sure, as he did everything well, without inquiring what the results to him would be. The consequence was that he ceased to be a member of the New York County Medical Society, as a member of which I should have been glad indeed of the privilege of sitting with him.

But there are none in the profession who I am sure did not always agree with me that the stigma did not rest upon Dr. Carnochan, but upon the Society, which to-day, fortunately leaves discretion in conduct to its members and makes them responsible only to themselves for it. It is no more a crime, it is no more an offense to be human, as Dr. Carnochan was.

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The world agrees that he was a great surgeon; those who knew him or knew of him agreed that he was a great man.

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RECENT LEGAL DECISIONS.

The estate of a lunatic is responsible in damages for his wrongful act of Killing another person.—It is well settled that though a lunatic is not punishable criminally he is liable in a civil action for any tort he may commit.—McIntyre vs. Sholty, Ill. Sup. Court, Sept., 1887. Magruder, J.

This view is sustained by the following authorities: Cooley on Torts. 99-103; 2 Samd. Plead and Ev., 318; Shear and Red. Neg., 657; Weaver vs. Ward, Hob., 134; Morse vs. Crawford, 17, Vt., 499; Behrens vs. McKenzie, 23 Iowa, 333; Krom vs. Schoonmaker, 3 Bar., 647; Ewells leading cases, 642, and cases there cited. But see *contra*.—Sedgwick, on damages, 456, who holds that on principle a lunatic should not be held liable for his tortious acts.

1. Insanity as a defence; proper rule of legal responsibility.—The capacity to distinguish between right and wrong, either abstractly or as applied to the particular act, as a legal *test* of responsibility for crime is repudiated by the modern and more advanced authorities, legal and medical, who lay down the following rules which the court now adopts:

1. Where there is no such capacity to distinguish between right and wrong as applied to the particular act, there is no legal responsibility.

2. Where there is such capacity, a defendant is nevertheless not legally responsible, if, by reason of the *duress* of mental disease, he has so far lost the *power to choose* between right and wrong, as not to avoid doing the act in question, so that his free agency was at the time destroyed; *and*, at the same time, the alleged crime was so connected with such mental disease, in the relation of cause and effect, as to have been the product or offspring of it *solely*.

2. Delusional insanity; the same rule.—The same rule applies to delusional insanity, and necessarily conflicts with the old rule laid down by the English Judges, in *McNaughten's Case*, that, in cases of delusion, the defendant "must be considered in the same situation as to responsibility, as if the facts with respect to which the delusion exists were real." (The 4th head-note in *Boswell's Case*, 63 Ala. 308, on this point, pronounced *obitur dictum*.

3. Insanity as a disease; question for jury.—The existence, or non-

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existence of the disease of insanity, such as may fall within the above rule, is a question of fact to be determined in each particular case by the jury, enlightened, if necessary, by the testimony of experts.

4. **Same; burden of proof; reasonable doubt.**—When insanity is set up as a defense in a criminal case, it must be established to the satisfaction of the jury, by a preponderance of the evidence, and a reasonable doubt of the defendant's sanity, raised by all the evidence, does not justify an acquittal.

6. **Special venire; and service of copy on defendant.**—Under the provisions of the act approved February 17, 1885, regulating the drawing and summoning of jurors. (Acts Ala. 1884–85, pp. 181–87), the special *venire* for a capital case consists of the regular jurors for the week, and the additional jurors (not being less than twelve, nor more than twenty-four) drawn by the presiding judge in open court; and a copy of the names of these jurors being served on the defendant, it is no objection that some of them were not then summoned, or were not summoned at all.

6. **Non-experts as witnesses in insanity cases.**—The rule on this subject stated in *Ford's Case*, 71 Ala. 385, adhered to that while non-experts may give their opinions on the question of the defendant's alleged insanity, such opinions must first be prefaced by a statement of the facts upon which it is based.

(Parsons vs. State, Supreme Court of Alabama, Dec. term, 1886–July, 1887.)

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JOURNALS AND BOOKS.

INSANITY AND ITS TREATMENT. By G. Fielding Blandford, M. D., 3d Ed., Edinburgh, 1884. Oliver and Boyd, 500 pp.

DR. BLANDFORD, delivered a course of lectures at the School of St. George's Hospital London, which he made the Basis of the first edition of this work, which has now been extended into its third edition, which has been revised by this distinguished alienist and author, to keep pace with the advance, made in the physiology and therapeutics of insanity since the work first came before the public.

The lectures are twenty in number. The first five are devoted to the Phenomena and Pathology of Insanity; the next eleven are devoted to the causes, symptoms and detailed descriptions of the various forms and phases of the disease; two chapters are devoted to the treatment, and the remaining two to the law of lunacy, and the examination, commitment and care of lunatics, committed for treatment.

Dr. Blandford's work is justly entitled to the weight which is everywhere given to it by the medical world.

It is intended in the nature of the case more as advisory to the general practitioner, than to the skilled alienist, in charge of institutions.

He dwells particularly upon the great importance of early treatment of the Insane in Asylums, and strongly assails the acts of friends, who refuse to interfere and give the sufferer, the benefit of treatment until the disease becomes incurable. He defends mechanical restraints in the mildest forms when he deems them necessary, but the work cannot in any true sense be quoted to justify the universal use of straight jackets and camisoles, that were so universally employed in our asylums ten years ago.

All in all, it is a work that the general practitioner of medicine should early place upon his library shelves. It is forcible, practicable, free from pedanty and excesses of nomenclature.

His views on classification of insanity are illustrated, by the views of the recent writers on that subject, up to the period of his revision, and are briefly, that insanity should be classified; 1, by symptoms, and 2, by the Pathology.

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600 MEDICAL DON'TS. By Ferd. C. Valentine, M. D. G. W. Dillingham, (New York, 1887).

This is a good book for the general public to read. We have read it, and while we "don't" agree to all these DONT'S, we do agree to most of them.

We "don't" think anyone will regret reading it, and *don't* doubt it would be beneficial, if generally read by patients and their friends.

The best critique we have seen of the book, is two columns from that genial humorist BILL NYE in the New York *World*, who *don't* quite endorse all Dr. Valentines *Don'ts*, but *don't* hesitate to give the book a first-class endorsement. We *don't* see how the amiable Valentine captured this peculiarly sweet WILLIAM but he has done it. *Don't* doubt it. If so read, "BILL NYE" on MEDICAL DONT'S in the *World*."

ARCHIVES DE L'ANTHROPOLOGIE CRIMINELLE. Lyons, France.

Prof. LOMBROSO, Prof. of Medical Jurisprudence at the University of Turin, communicates an interesting case to this JOURNAL, Sept. number. 1887 upon the case of JEAN RIVADOSSI, an epileptic criminal who slew three of his children in February, 1886.

Prof. LOMBROSO, after a careful review and examination of the case, concludes that he was not responsible for his act. p. 432.

Prof. J. VON MASCHA, Prof. of Medical Jurisprudence at University of Prague, in the same number, contributes an article on an interesting case of infanticide where he determines from the post-mortem examination of the infant that it was born alive, and was killed by its mother. p. 438.

He communicates very interesting details of a second case where the body of the child was in an advance state of putrification, and had been examined by experts who determined the child was born alive the cause of death, in which he dissents from the conclusions previously arrived at. p. 445.

He also communicates a case of untimely death following the effect of a stone striking the head, the details and fatal results of which are shown from the autopsy, the body being in an advanced stage of decomposition. p. 445.

The last case submitted was very interesting being, to determine whether death was due to injuries received from wounds, or from pneumonia and an abscess, and reviewing the examination and decision of experts upon the case.

He concluded that death was due to the latter cause. p. 448.

ANNALES MEDICO-PSYCHOLOGIQUES, XIV. year, No. 1. G. Massan, Publisher, 120 Boulevard St. Germaine. Editors, Baillarger, Foville and Ritti

The CRONIQUE was by Dr. Baume on the Amendments to the French

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Lunacy Statutes before the French Senate. Dr. Baillarger contributes a paper on General Paralysis. Dr. Victor Parant submits a translation of Dr. W. W. Ireland's paper on the Insanity of the King of Bavaria. Dr. Aug. Planes contributes an interesting statistical paper on the Increase of Insanity in Paris from 1872 to 1885. Dr. Donnet contributes a paper regarding the Intoxication of Professional Wine Tasters and other liquors such as tea, which had been raised by Dr. Ach Foville. Dr. Mordret, Superintendent Asylum Du Mans; contributes clinical details of a case under his care of epileptic attacks with cerebral hemorrhages. Dr. Constans Honeray, Inspector General of the Insane Asylum, contributes a paper in regard to the proposed legislation for Alienists, pending before the Senate, as to the proper establishment of a Permanent Commission. The proceedings of the Society Medico-Psychologique from July 26, 1886, to and including the 25th October, 1886, communicated by Dr. Charpentier, are given and the number concludes with a Review of the English Journals, and Book Notices.

THE BOSTON MEDICAL SURGICAL. It is very doubtful if there is an abler medical weekly on this side of the Atlantic.

LA PSICHIATRIA LA NEUROPOLOGIA E LE SCIENZE AFFINI. Directed by Prof. G. BUONOMO, and edited by Dr. L. BIANCHI. is one of the ablest of our Italian exchanges. We shall review it more at length soon.

MEDICAL JURISPRUDENCE. By Marshall P. Ewell, M. D., LL. D. Little, Brown & Co., Boston, Mass., 1887. pp. 397.

Prof. Ewell has added this volumes as a text-book to be put in the hands of students, more especially law students, as a branch of study before admission to practice, and the book is written as well for Medical students.

We quote from his preface some excellent observations, that must commend themselves to lawyers and physicians everywhere.

Prof. Ewell has divided his work into twenty-two chapters.—The first discussing the general subjects, Experts, and Expert Testimony—Relation of Physician to Patient—Medico-Legal Inspections—Wounds, Burns and Scalds—Signs of Death—Asphyxia—Drowning, Hanging, Strangulation—Heat, Cold, Lighting, Starvation—Pregnancy, Birth, Delivery, Abortion, Infanticide, Rape, Sodomy—Impotence and Senility—Sex, and Abnormal Births—Legitimacy, Baptising, Personal Identity—Life Insurance—Feigned and Obscene Diseases—Malpractice.

His twentieth chapter is devoted to Toxicology, which is treated briefly and by generalization.

The chapter on Insanity is comprised within fifty pages of the volume, and the author states, that "nothing more than a mere outline" of the subject has been attempted. Aside from Bucknell & Tuke's Manual of

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Psychological Medicine, Dr. Ray and Dr. Hammond's treatise, no recognized authority is quoted.

It would seem incredible that a writer of Dr. Ewell's attainments, would give space to the opinion of a medical student, who attempted a treatise on Insanity shortly after he left the medical schools, without any asylum experience or practice in Insanity, and whose definition of Insanity and his claims, as announced in the preface of the work, has made him the laughing stock of both professions, on both sides of the Atlantic. This chapter is not carefully written, and in many respects should be rewritten in the light of the modern writers of our day. The last chapter is interesting and able regarding the disposition of dead bodies.

The work is, in many respects, like the recent one issued by Dr. John Abercrombie, of London, though less carefully written, and is designed more as a text-book for Students than as a work for the Legal or Medical Practitioner.

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Books, Journals & Pamphlets Received.

M. LENTZ.—Department of Justice (Brussels). Eleventh and Twelfth Reports of the Insane Asylums of Belgium, years, 1874 to 1876–1877–1881 1878–1884.

Recueil des Lois, Dientes, Reglements and Circulaires. Concernant les "Etablissements de Bienfaisance" of Belgium. Tome 1st, (1871) Tome 2nd, (1873) Tome 3rd, 1st part (1881).

SETH. S. BISHOP, M. D.—Hayfever (1887).

PROF. DR. MORRIS BENEDICT (Vienna).—Ueber Mathematische Morphologic und uber Biomechanik Biologie und Criminalistik (1886).

Des Rapports, Existant entro, La Folie, ebla Criminalite (1886).

GEO. P. TUCKER, M. D. (Sidney, Australia).—Report on Lunacy to the Government of New South Wales (1887).

"Lunacy in many Lands."

A. S. BARNES & Co.—Hygiene for Young People. Hygienic Physiology. Child's Health Primer.

LEWIS D. MASON, M. D.—Eighteenth Annual Report, Inebriates' Home, Fort Hamilton (1887). Inebriety a Disease (1887). Alcoholic Insanity, (1883). Relation of Disease to Inebriety, (1887).

CHARLES C. SOULE.—Catalogue Law Books, with Portraits of legal authors (1887). Boston.

HULL FANTON, ESQ.—Memorial Addresses on Hon. Charles Cook (1887).

L. E. BLECKLEY, ESQ.—Truth at the Bar. Address before Bar Association of Ga. (1887).

L. E. MCLEOD, ESQ.—A day at Marshland—Marshland and the Scale of Points (1887).

JOHN MCCLAY PERKINS.—Shall the Federal Patent Law be Repealed?

W. THORNTON PARKER, M. D.—The Burton Case (1887).

EDWARD BORCK, M. D.—Ovarian Tumors (1887).

J. H. KELLOGG, M. D.—Retro Displacements of the Uterus and Procidentia (1887).

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H. A. BUTTOTPH, M. D.—Organization and Management of Insane Asylums (1887).

Insanity, its Nature, Causes, Classification, Pathology and Symptomatic forms. Presidential address (1887). Organization and Management of Insane Asylums. (Advance sheets Alienist and Neurologist) (1887).

THE MEDICAL STANDARD, Chicago. Vol. II., No. 4 (1887).

J. B. LIPPINCOTT & Co.—Bulletin of New Publications (1887). Classified Catalogue (1887).

THE MAGAZINE OF ART.—Cassell & Company.

MEDICAL JURISPRUDENCE SOCIETY OF PHILADELPHIA.—Constitution, By-Laws, List of Officers and Committees (1887).

THEO. H. KELLOGG, M. D.—Hydrotherapy in Mental Disease (1887). Laryngeal Cramp of Musicians and Speakers (1887). Dietetics in Mental Disease (1887).

MARSHALL D. EWELL, M. D., LL.D.—A Manual of Medical Jurisprudence. Little, Brown & Co., Boston (1887).

G. FIELDING BLANDFORD, M.D. Oxon.—Insanity and its Treatment. 3d Edinburgh edition (1884).

Dr. T. L. WRIGHT.—INEBRIISM. W. G. Hubbard, Columbus, Ohio (1887).

WM. D. GRANGER, M. D.—The Increase of the Insane and their Public Care (1887).

W. B. FLETCHER, M. D.—Trephining for Traumatic Insanity (1887).

T. L. MITCHELL and Mrs. ELLA R. TENANT, Marietta, Ga.—The first excellent number of Vol. I. of *Woman's Work*, Nov., 1887.

L. WHITON, Esq.—The Penal Aspects of Suicide. Reprint (1887).

THE ESOTERIC, Vol. I., No. 5. Boston, Nov., 1887.

FREDERICH NEEDHAM, M. D.—Presidential Address (July, 1887).

W. G. STEVENSON, M. D.—Reprint of "Criminality" (1887).

C. H. HUGHES, M. D.—"The True Nature and Definition of Insanity." Report from Alienist and Neurologist (1887).

THE MEDICAL WAIF, Vol. I., No. 2, Dec., 1887, Lafayette, Ind.

ALBRECHT ERLENMEYER.—Die Morphinumducht. (Louis Heuser) (1887).

DR. JULES SOCQUET.—*Criminalité en France* (1884). Asselin et Cie., Paris.

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THE MAGAZINES.

THE COSMOPOLITAN.—Is making a strong bid for popular favor. Its illustrations are creditable, and it has a talented list of contributors. The low price and its excellence ought to win, and we believe it will win.

SCRIBNER'S.—The Christmas number is a splendid success, and shows no end of energy especially in its publishing and advertising department.

THE NEW ENGLANDER.—Is an ably edited Journal, and we read it with pleasure.

JOURNAL OF NERVOUS OR MENTAL DISEASES.—We understand this Journal has gone into new hands, and that Dr. GRAEMME M. HAMMOND will take editorial charge. We believe he will make it still better, if possible. It would, however, in our opinion be stronger as a quarterly than as a monthly.

THE ALIENIST AND NEUROLOGIST.—Is its energetic and ambitious rival, and Dr. CHAS. H. HUGHES is pushing it forward with rapid strides. There is, however, ample field in the medical profession for both these valuable Journals.

LITTELL'S LIVING AGE.—The selections are admirable.

AMERICAN LAW REVIEW.—Has published our article from our advance sheets, current number on "The Medical Jurisprudence of Inebriety"

THE PHILADELPHIA MEDICAL REGISTER.—Has also published the same article, and is coming to the front as a popular journal.

THE THEATRE.—Comes to us in a new dress. We met DESHLER WELCH its genial editor the other evening, at the complimentary supper to Mr. Steele Mackaye at the LAMBS' CLUB. We think we can understand why he makes the Journal go.

THE CHAUTAUQUAN.—We are glad to place this Journal on our exchange list. It is full of wheat; there is very little chaff.

GRIP.—The CANADIAN Humorist, is the best thing we see in its domain from that side the boundary line.

PUCK.—The Christmas number, was, very, very good.

JUDGE.—We did not see its Christmas number, though it had one.

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JOURNAL OF JURISPRUDENCE.—Contains two papers, we wish to reproduce and will if we can find room.

LIPPINCOTT'S.—Gives its readers a serial story gratis. Cheap: try it.

THE ECLECTIC.—Its December number is excellent.

THE ATLANTIC.—The December number concludes the sixtieth volume. It has an attractive table of contents.

THE NEW PRINCETON REVIEW concludes its fourth volume of the New Series with the November number, which is filled with well selected articles.

THE MAGAZINE OF AMERICAN HISTORY.—Mrs. Martha J. Lamb certainly deserves all the praise bestowed upon her for the ability with which she edited this valuable journal. We welcome it to our exchange list and read many of its articles with great pleasure and profit.

THE FORUM.—Has a strong list of writers in its December number.

THE AMERICAN MAGAZINE.—Is making a good fight for popular recognition.

THE OVERLAND MONTHLY.—We welcome this visitor from the Pacific coast to our exchange list. It has neither peer nor rival west of the Sierras.

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WILLIAM TUKE.

(1732–1822.)

When a man's name is famous and his memory is revered, more than a century and a half after his birth, there must be some good reason for it, and the desire is natural to see the features of one, who thus left his mark upon the age in which he lived. We are able to gratify this desire, by giving in this number an outline of the countenance of this remarkable man, and practical philanthropist. When in England we begged it of his great-grandson, Dr. Hack Tuke, of London, who informed us that it was taken when his ancestor was about sixty. In an obituary notice of him it is noted, that although he hardly reached the middle size, "he was erect, portly and of a firm step. He had a noble forehead, a majestic brow, the eye of an eagle, an arched nose, thin lips, a projecting chin and a commanding voice; his countenance and bust entirely of the Roman cast, while his mien was patriarchal and dignified." This description obviously applies to a much later period of life, than that at which the likeness which we are able to present to our readers was sketched.

Everyone familiar with the history of the reformation of the treatment of the insane in Britain, knows what it

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was, that made his name to be held in honor where he lived, and venerated after his death. He became aware of the cruel treatment to which insane persons were subjected ; he recoiled from the secrecy with which they were concealed from their relations and friends when once placed in an asylum ; he was altogether free from the notice that they were bewitched or possessed, and must therefore be regarded with wonder and horror ; his combined humanity and common sense, seemed to lead him directly to the possibility of caring for and teaching them, with the consideration and kindness employed in other disorders. By little and little the accomplishment of these hopes was fulfilled. Nothing but an inflexible will, indomitable energy and pluck, could have brought about the success of his labors, and induce others to co-operate with him. This is the work which has made him deserving, of the grateful remembrance of his countrymen, and not of them only but of many abroad who received their knowledge of a better system of managing the insane, from the example set by the institution at York, founded by Tuke, in 1792, and called "The Retreat," in order to indicate its true character as a refuge, for shattered and scattered brains from the distractions of life.

We who live at a period when the general methods of treatment of the insane are humane, can hardly realize the almost universally bad character of the treatment to which they were subjected at that period. For the most part, they were either neglected or were the victims

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of modes of medical treatment, which are now recognized to be extremely injurious.

The Retreat was established in the hope of ameliorating the condition of the insane, and was conducted on humane principles. Irons were never, on any pretence, employed, and the resort to personal restraint was only permitted in extreme cases. The law of kindness was kept prominently in view. The pervading influence of men not merely good, but animated by common sense and enlightened views was soon felt. The object in view in the establishment of this institution, was indeed realized to a greater extent, than was expected of Tuke when he projected it. His life was extended to a great age—ninety—and he pursued this noble work till within a short period of his death in 1822. In the obituary notice from which we have already quoted occurs the following passage: "William Tuke has given honor to his family by his virtue, his talents and his public spirit, and left them a splendid name. . . . This great man is gone. He lived a long life, without a blot or stain or even a reflection on his bright and fair career. His name and example will never die."

Our space does not allow of a notice of those who cooperated with him in establishing and conducting the Retreat—Jepson, Fowler, Lindley Murray and others, the last mentioned being an American who took up his residence in York and became the celebrated grammarian. Tuke's son and grandson, Henry and Samuel Tuke, supported and continued the work, the latter in 1813

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dedicating to him a book on the results of treatment at the Retreat, which became famous and greatly extended the public acquaintance with the reformed system. Legislation followed, William Tuke himself having to give evidence before the House of Commons.

Although the Retreat was, in the first instance, established for the Society of Friends, and its management has been always vested in it, its repute gradually led to its extension beyond the limits of that body, and we understand that at the present time there are nearly as many non-members, as members cured within its walls.

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From a Painting by Cave.] ORIGINAL BUILDING OF THE RETREAT, YORK. INSTITUTED 1792.

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YORK RETREAT.

We are indebted to the kindness and courtesy of DR. D. HACK TUKE, of London, for the portrait sketch of his ancestor, William Tuke, which we give in this number. It is from a pen and ink sketch preserved in the family. The memory of WILLIAM TUKE, like that of CONNOLLY, PINEL and GUISLAIN, will be green and blessed as the years roll on.

It seems to us fit, when we give this face to the world, that we should also give with it the theatre of his early work, that YORK RETREAT, which he made famous among alienists and philanthropists throughout all the world, as the spot where a new doctrine, a new truth and a new force was to be planted and take root in the care and treatment of the insane, in place of that system whose scandalous abuses, had been exposed in a private asylum at York, near the site of the institution founded by the Society of Friends through his instrumentality and zeal. The foundation stone of YORK RETREAT was laid in the fulness of the new doctrine of

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love, of *tenderness*, of *kindness* in the care and management of the insane.

This was the inscription cut into it:

"HOC FECIT.
AMICORUM CARITAS IN HUMANITAS
ARGUMENTUM,
ANNO DOMINI, MDCCXCII."

This cut is reproduced from the frontispiece of the work of Dr. D. HACK TUKE'S, "History of the Insane in the British Isles."

It is the old Retreat founded in 1792, and is that known in England in 1813, as the pioneer institution for ameliorating the condition and treatment of the insane, famous throughout Christendom, and indissolubly associated with the name, fame and memory of WILLIAM TUKE and his descendants.

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Watson, J. H., Esq.
Weisse, F. D., Dr.
Wight, J. S., M. D.
Whaley, Wm., Esq.
Weisman, F, H., Esq.
Wakeman, T. B., Esq.
Wright, C. P., Esq.
Williams, Arthur D., **Esq.**
Wightman, F. B., Esq.
Warner, F. M., M. D.
Wilkins, Prof. Geo.
Wright, Amelia, M. D.

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H. Wardner M.D.

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*EIGHTH INAUGURAL ADDRESS OF CLARK BELL, ESQ.**

As President of the Medico-Legal Society of New York.

Fellows of the Medico-Legal Society :

I shall ask you to briefly glance, over the labors of the body during the past year, to look at its present position, its objects, aims, future prospects and responsibilities, and speak of the progress of Medical Jurisprudence as a science, in the world, at the present moment.

MEMBERSHIP.

Our roll of active members, December 31, 1887, contained 273 names, of Corresponding 148, and of Honorary 11, making our total membership 432. On December 31, 1886, our roll contained 389 names--258 Active, 120 Corresponding and 11 Honorary. We have elected during the year 48 Active and 31 Corresponding members. Total 79 members.

The active members on December, 31, 1887, were Lawyers, 138 ; Doctors, 124 ; Scientists, 11. Total 273. The Corresponding members were; Lawyers, 19; Physicians, 119 ; Scientists, 10. Total 148.

* Pronounced January 10, 1888.

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Honorary members: Legal, 5, Medical, 6. Total 11.

The increase in membership has been, over and above all losses by death or resignation: Active members, 15; Corresponding, 28; total 43.

We have lost by resignations, 29; deaths, 7. Total, 36.

NECROLOGY.

The loss by death to this body during 1887 has been serious. Among the active members we have to mourn

AARON J. VANDERPOEL, the eminent lawyer.

HORATIO F. AVERELL. Esq., of the New York Bar.

DANIEL R. LYDDY, Esq., of the New York Bar.

Dr. JOHN M. CARNOCHAN, the eminent surgeon of New York.

Corresponding Members.

Dr. JEAN TH. GALLARD, who was the Secretary of the Medico-Legal Society of France from the day of its organization to his death.

Prof. Dr. AUGUSTIN ANDRADE, an eminent physician and scientist of Mexico.

Judge GUY H. MCMASTER, Surrogate of Steuben County, New York, at Bath, N. Y..

HENRY BUIST, Esq., of Charleston, S. C.

THE WORK OF THE YEAR.

The following papers have been read before the Society at its meetings, a large number of which have appeared in the MEDICO-LEGAL JOURNAL:

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The Retiring Address, January, 1887, of President ISAAC LEWIS PEET, M.D.

The Inaugural Address, January, 1887, of President CLARK BELL, Esq.

"*Some Aspects of the Druse Case,*" by E. W. CHAMBERLAIN, Esq.

"*A Simpler and more Intelligent Classification in Mental Diseases Important,*" by Prof. J. J. ELWELL.

"*Insanity and the Care of the Insane,*" by CLARK BELL, Esq.

"*Prison Labor and Public Utility,*" by LOUIS LIVINGSTONE SEAMAN, M. D.

"*Isaac Ray,*" by CHAS. K. MILLS, M. D., of Philadelphia, Pa., President American Neurological Association.

"*The Penal Aspects of Suicide,*" by L. C. WHITON, Esq., of New York.

"*The Mental and Physical Capacity of Man, in the Rapid Expression, Receiving and Recording of Language,*" by R. S. GUERNSEY, Esq., of New York.

"*Opium Inebriety,*" by Dr. IRA RUSSELL, of Mass.

"*Criminality,*" by W. G. STEVENSON, M. D., of Poughkeepsie, N. Y.

"*The Relation of Intemperance to Insanity,*" by CLARK BELL, Esq.

"*The Post Mortem Imbibition of Poisons,*" by GEO. B. MILLER, M. D.

"*Imbibition of Poisons,*" by Prof. JOHN J. REESE.

"*The Medical Jurisprudence of Insanity,*" by CLARK BELL, Esq.

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The same general subject by Dr. NORMAN KERR, President of the British Society for Study and Cure of Inebriety; Dr. JOSEPH PARRISH, President of the American Society for Study and Cure of Inebriety; ANTHONY L. DYETT, Esq., of the New York Bar; CHAS. H. HUGHES, M. D., Editor *Alienist and Neurologist*, St. Louis, Mo.; Ed. C. Mann, M. D., of Brooklyn, President American Society of Anthropology; T. D. CROTHERS, Editor *Journal of Inebriety;* T. L. WRIGHT, M. D., of Bellefontaine, Ohio; Rev WM. TUCKER, M. D., of Mt. Gilead, Ohio; Mrs. M. Louise Thomas, President of "SOROSIS;" Dr. L. W. Baker, of Retreat for Epileptics of Baldwinsville Massachusetts; MORRIS ELLINGER, Esq., late Coroner of New York; LUCY M. HALL, M. D., of Brooklyn, N. Y., these papers were read at November and December meetings of the Society, the reading and discussion of which was presided over by ex-Chief Justice Noah Davis. They were discussed by Messrs. AUSTIN ABBOTT, Dr. W. G. STEVENSON; Dr. MASON, consulting physician to Inebriates Home, Fort Hamilton; Dr. FRANK L. INGRAM Dr. EMMETT L. DENT, of Insane Asylum, Ward's Island; Dr. W. F. Holcombe; Dr. CHAS. S. SHEPARD, of Brooklyn; Dr. IRA RUSSELL, of Winchenden, Mass.; President Clark Bell, Esq.; Dr. S. WATERMAN, of New York; Dr. A. JACOBI, President New York Academy of Medicine; Dr. ISAAC LEWIS PEET, Superintendent Deaf and Dumb Asylum; Dr. S. K. PADDOCK, Medical Examiner of Springfield, Mass.; and the discussion was summed up by ex-Chief Justice NOAH DAVIS.

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BANQUET.

The Society gave its annual banquet at the Hotel Buckingham, where its meetings have been held, it was largely attended by members and their wives, and by distinguished guests, from neighboring States and cities were present.

PRIZE ESSAYS.

It has been decided by the Executive Committee to offer three prizes: First of $100; second of $75 and third of $50, for the first, second and third best essay, on any subject within the domain of Medical Jurisprudence. The first prize offered, is by our member ELLIOTT F. SHEPARD, Esq., and the remaining prizes are donated by a few members of the Society.

The details have appeared in the JOURNAL, and it is hoped most of our members will compete for these prizes, which are announced to close on April 1, 1888.

MEDICO-LEGAL JOURNAL.

The most important work of the body is doubtless wrought by the Medico-Legal journal, in disseminating throughout the scientific world, the papers read before it, and awakening interest in the science, among its students everywhere. Aside from the publication of a part of these papers, and the discussions thereupon, the JOURNAL, has published portraits of Dr. JOHN P. GRAY, late Superintendent of Utica Asylum, and a sketch of Utica Asylum as it stood in 1867; a portrait of Dr. ISAAC

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RAY; a copy of the bust of the great Belgian alienist, JOSEPH GUISLAIN, with a sketch of a statue proposed to his memory, (but not the statue unveiled at *Ghent* last July); a portrait of AARON J. VANDERPOEL of the New York Bar; of Hon. GUY H. MCMASTER, Judge and Surrogate of Steuben County, New York; a portrait of the Elder TUKE of England, reproduced from a drawing in the hand of his descendant D. HACK TUKE, and a cut of YORK RETREAT, as it existed at the time of his labors.

The circulation of this journal has steadily increased, but it needs the active support and co-operation, of the members of this body to make it more successful and useful.

During the past year I have sent the following circular letter to many eminent Alienists, Jurists, Judges, Scientists and Publicists:

MEDICO-LEGAL JOURNAL ASSOCIATION,
Office of the Editor,
No. 57 Broadway.
NEW YORK, 1887.

DEAR SIR:

Please give me your idea of the best definition of insanity under our present knowledge of that subject.

Also what in your judgment should be the legal test of criminal responsibility for acts committed by persons suffering from any form of mental disease. I am making a study of these topics, and would feel greatly obliged for your views.

Very faithfully yours,
CLARK BELL.

Of replies received many have been published in the JOURNAL. I should be glad to receive responses to these queries from every member of the Society, who has not

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already responded, whether Active, Corresponding or Honorary, as well as from all Judges, Lawyers, Medical Men, Superintendents of Asylums, Alienists or others interested in this subject whose eye it reaches.

MEDICO-LEGAL PAPERS—SERIES 4 AND 5.

Pursuant to my recommendations of last year, subscriptions to the proposed volumes have come in, sufficient, to warrant the Executive Committee and the Society, to authorize the publication of Volume, or Series 4, which it is hoped will be completed the present year.

New members and all members, who have not subscribed for these volumes, are urged to send their names at once to the President, or Secretary, so that the burden of publication may fall lightly on the Society and be distributed widely among members. The list of subscribers has appeared from time to time in the JOURNAL, and the cost is $3.50 per vol. in cloth and $2.50 in paper.

THE LIBRARY

Has received very little attention during the past year from our members. This has been a subject of regret to me, and the question of a suitable home and location for our library, is one of the most important questions, which the body has before it for consideration, to which I invite the earnest and thoughtful attention of the Executive Committee, and of every member of the Society.

OUR AIMS.

To my mind the present endeavor of this Society, should

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be to increase its active membership, in the various States and Territories of the United States, with a view of making the body thoroughly national in character, and not local in any sense, except as to the place where its sessions must needs be held, in the metropolis of the country. This has been our policy for the past few years to some extent, but it should, for the present at least, be more pronounced, and more aggressive.

If ten men could be selected at the least, from each American State and Territory, who occupied prominent positions in the Legal or Medical professions, or as Chemists, Scientists or Publicists, it would bring the Society into a greater sphere of usefulness, broaden and widen its field of action, and bring to its notice questions arising in the Courts of the American States, for active discussion and criticism, which would be of enormous consequence to the progress of the science in America.

Judge H. M. SOMERVILLE, of the Supreme Court of Alabama, who has recently joined this Society, and P. BRYCE, M. D., Superintendent of the Insane Asylum at Tuscaloosa, Ala., who unites to-night, will take the lead of this work in the State of Alabama and in some of the Southeastern States, while prominent gentlemen in other States will aid the work.

We have now members in most of the States and Territories. We have no members in thirteen of the States, and we should take steps at once to bring this subject to the attention of prominent men in all these States.

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As we vote by ballot, by mail, non-resident members need not feel under obligation to attend the sessions, unless convenient, and to aid this movement I have recommended that the Constitution and By-Laws be so amended as:

1. To reduce the annual dues of members residing outside the State of New York to $2.00 per annum, which will give them the Journal free, the price of which is $3 per annum, which recommendation has been unanimously adopted this evening.

2. To increase the number of Vice-Presidents of the Society, so that one may be chosen from each State or Territory, to these responsible positions, from representative men and thus widen and broaden the influence of the Society, which plan will come before the body at its next session.

PUBLICATIONS.

The Committee on Publication and the Executive Committee, are considering the propriety of publishing in one volume, the various papers read before the body on Alcoholism and the Medical Jurisprudence of Inebriety. These papers, with the discussions upon them, would make a respectable volume, containing the labors of a large number of scientists, and would be a valuable contribution to the literature of the world, upon a subject now arresting public attention.

This must be done by private subscription, as the financial situation of the Society, would not at present warrant such an expenditure, in addition to the obliga-

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tions which it has assumed, to the MEDICO-LEGAL JOURNAL and for the publication of Medico-Legal Papers, Series 4. and 5.

A subscription has been circulated which will defray a portion of this expense, and it is proposed that the residue can be met by a subscription to the work itself, which will be furnished to all who choose to subscribe at the nominal price of 50 cents in cloth and 30 cents in paper.

Members desiring to aid this work will kindly send their names and the number of volumes for which they subscribe to the President or Secretary without delay.

THE PROGRESS OF THE SCIENCE.

AMERICA.

The increase of interest is marked and well developed. The MEDICAL JURISPRUDENCE SOCIETY OF PHILADELPHIA, is flourishing and doing a good work. I submit a list of the papers read before this Society during the past year, kindly furnished me by the honored Secretary, Dr. Henry Leffman.

Live Birth in Medico-Legal Relations. By Dr. JOHN J. REESE.

Will Contests. By WALTER E. REX, Esq., late Register of Wills for Philadelphia.

The Handwriting of the Insane. By HENRY HAZLEHURST, Esq.

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The Claim of Moral Insanity in its Medico-Legal Relations. By J. HENDRIE LLOYD, M. D.

A Summary of the Weaver Case. By HAMPTON L. CARSON, Esq.

A Strange Homicide Case. By JOHN T. ESKRIDGE, M. D.

CRIMINAL PSYCHOLOGY. By W. D. ROBINSON, M. D.

Suicide in its Relations to Insanity. By WM. N. ASHMAN, Esq., President of the Society.

In addition there was a special joint meeting, with the Neurological Society, on January 24th, 1887, at which several papers on the care and treatment of the insane were read and discussed.

The following officers were elected January 10, 1888:

President, Dr. C. K. Mills; Vice Presidents, J. A. Clark, Esq., Henry Leffman; Secretary, Dr. F. X. Dercum; Treasurer, P. H. Coggins; Recorder, Dr. G. M. Bradfield.

The same can also be said of the CHICAGO MEDICO-LEGAL SOCIETY and it is a source of great pleasure to see the interest maintained in these great cities by our sister societies. I am indebted to its Secretary, Dr. Scott Helm for a list of the papers read before it, and of their authors.

The MASSACHUSETTS MEDICO-LEGAL SOCIETY is making steady progress in its domain, being the organized action of the MEDICAL EXAMINERS of that State, who take the place of the CORONERS that have been abolished

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there. The result of their Conference and combined action, the value of the statistical and other valuable scientific data thus collected, cannot well be estimated, but enough has transpired to commend it to the American States, as an example well deserving emulation and imitation.

While one or two journals in America have been recently discontinued owing to special causes, it cannot be doubted that the general interest in the profession of Law and Medicine in the Science of Medical Jurisprudence is decidedly on the increase — but this is rather among individuals, than among the professional organizations.

There was no section of Medical Jurisprudence at the recent International Medical Congress at Washington, and the science is almost wholly neglected in the American Bar Association, and, so far as I am aware, in the State Bar Associations, though it is to be hoped this will receive more attention in the near future. While the same criticism is true as to National and State Medical Associations it must be conceded that the science has received greater attention among the Medical Schools, than those of Law. A chair of Medical Jurisprudence, should be in every Law as well as Medical School, and of course, in every university of learning.

LUNACY STATUTES.

The Governor of New York in his recent message, has urged the revision and modification of our lunacy

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statutes, in deference to public sentiment, and this subject will come before the present Legislature assembled at Albany. Thorough and intelligent revision of our lunacy statutes can, however, hardly be well done, by a Legislative committee, in the hurry and crowded character of its deliberations.

This work has hitherto been most successfully accomplished, by selected Commissioners in France, Italy, Great Britain, Pennsylvania and elsewhere, and we hope to see Gov. Hill name a Commission composed of men selected for their ability to meet these questions, requested to submit a complete revision of our lunacy statutes, which should be done without expense to the State, so far as the labors of the Commissioners are concerned.

MEDICAL EXAMINATION IN LIFE INSURANCE

Is a subject of very great importance, and deserves more than a passing notice.

This country now leads the world in life insurance. This must be its attitude for the few remaining years of this, and for, doubtless, the first fifty years of the twentieth century.

Its success must largely depend upon the ability and care of its Medical Examiners.

Medical men need special training for this work, the same as for any branch of skilled scientific labor. A Doctor merely as such, is no more fit for this duty, without special knowledge, than he would be to pass on a question of lunacy, or to give an opinion on a poisoning

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case. This subject deserves our careful thought. Mr. W. M. TAYLOR, Vice President of the Connecticut Mutual Life Insurance Company, has recently contributed an able paper on this subject. Dr. CHARLES F. STILLMAN has written a treatise upon it, which will shortly appear.

It is one of the live questions of the hour.

GREAT BRITAIN.

There is as yet, no national or local society of Medical Jurisprudence, in the British Islands.

In SCOTLAND more attention seems to be given to the science, due doubtless to the influence of the chairs of Medical Jurisprudence in the Scotch Universities.

The Bar is behind the Medical profession in the matter, and the obstacles in the way of uniting the two professions, in one society for common work in this science, seem, insurmountable up to the present moment. It is to be hoped that some of the men of the Bar, will take the initiatory in such a movement.

The English and Scotch alienists, and neurologists, however, keep abreast with the advance of the science in other countries. The editors of great British journals like the *British Medical Journal*, the *London Lancet* and others are fully alive to these questions, and keep pace with scientific research. *The Journal of Mental Science and Brain* stand high in their respective domains.

FRANCE.

The position of Forensic Medicine in France is grati-

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fying. The labors of the Medico-Legal Society of France under the Presidency of EMILE HOURTELOUP, of the Paris Bar, have been valuable and gratifying. The death of JEAN TH. GALLARD, for long time secretary of the French Society, and the selection of Dr. Motet as his successor, has been the most marked event in that Society. Many important papers have been read before that Society.

Among the French journals THE ARCHIVES DE NEUROLOGIE, LES ANNALES MEDICO PSYCHOLOGIQUE, L'ENCEPHALE, ANNALES D'MEDICINE LEGALE, and the new journal at Lyons, ARCHIVES D'ANTHROPOLOGIE CRIMINALLE are the leading French journals in the various specialties. LE PROGRESS MEDICAL, LE REVUE DE MEDICINE, ARCHIVES OBSTETRIQUES and other journals have maintained their former high character and usefulness.

ITALY.

In no country has there been such extended labors as in Italy. The Societe di Freniatricia has just published an extended volume as the result of its labors during the past year, under the able Presidency of Senator and Prof. ANDREA VERGA.

The Italian journals are in the front rank of the World in the various departments of NEUROLOGY, PSYCHIATRY, Forensic and State Medicine. Among the leading journals are LA PSICHIATRIA, LA NEUROPATOLOGIA, conducted by Prof. G. BUONOMO and Dr. L. BIANCH, La Revista Sperimentale de Medicene Legale, Revista Clinicia do Bo-

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logna, Archives de Psy-Scien Penali et Antropologia Criminalle, Archives per Malattia Nervosa, Scienza Italiana, and many others.

GERMANY AND AUSTRIA,

and the German speaking countries. Forensic Medicine receives careful and thorough attention in the German universities. There is a chair of Forensic Medicine in each. There are many savants who devote their lives to the study and investigation of this science.

The work of such men as KRAFFT, EBING, THEO. MEYNERT, MORITZ BENEDICT, Prof. MASCHKA, Dr. H. LAEHR, Prof. VIRCHOW, Prof. HOFFMAN, K. KORNFELD, and hosts of others constantly enrich a literature of Forensic Medicine surpassed by none, and the journals keep pace with the progress of scientific research. The leading journals of Germany in the domain of Medical Jurisprudence are The Quarterly Journal of Medical Jurisprudence, at Berlin, M. Eulenberg, Editor, and Friedrich's Blatter of Legal Medicine, edited at Neuremburgh, both of which are in the front rank of journals of this kind in the world. The Jurbucher fur Psychiatrie, Zeitschrift fur Psychiatrie, Der Gerichstaal are among the leading Journals in the German tongue.

BELGIUM

does its work in its societies by its scientific men. It has no Medico-Legal Society. The students of the science in Belgium are chiefly medical men.

The Belgium Bar have not as yet grasped the hands

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of their great Physicians in a society common to both professions.

The leading BELGIAN SOCIETY is the Society of MENTAL MEDICINE, which includes the leading alienists of Belgium, and its Bulletin, registers and publishes its labors. It has no journal devoted to the science of Medical Jurisprudence.

HOLLAND

is in a similar condition, and in many respects is the counterpart of Belgium. The alienists of Holland are the only men who take much interest in the science, and the Netherlands have yét to organize a society which will combine the labors of the lawyers and medical men, as in France or our own country.

The Netherland Society of Psychiatrie is at present the foremost society in Holland so far as Mental Medicine goes, and embraces in its membership the leading Alienists of that country, it bears the same relation to Holland that the Society of Mental Medicine of Belgium does to that country.

RUSSIA

is devoting more study to the subject. Her great society is the Society of Psychiatry of St. Petersburgh. She has no Medico-Legal Society. She has a very able body of Alienists. Prof. Mierzejewsky, is President of the Russian Society and editor of the Journal Archives of Psychiatry Neurology and Legal Psycopathology, and Prof. Kowalewsky, editor of the Messenger of clinical and

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Legal Psychology and Nervous Pathology of Kharkoff are among the foremost writers and thinkers among the Russian students of Forensic Medicine on the medical side, while George Dragondorf of Dorpat Russia is the foremost of the Russian Toxicologists.

We learn that a new journal has been established in St. Petersburgh, Russia, devoted to Medico-Legal Science and Public Hygiene, edited by Dr. Schmullef, but we have not as yet seen a copy of this journal.

SCANDINAVIA.

Prof. Axel Key, editor of Del Kongelige Sundheds Kollegiums etc., of Copenhagen, Denmark, is the leading exponent of Forensic Medicine in the Scandinavian countries, and his journal the highest authority there. A leading Journal is Fordsand Svenska Lakare Salcskapts, at Stockholm in Sweden.

SPAIN AND PORTUGAL.

We do not know as much of Spain and Portugal in their relation to Forensic Medicine as we hope to.

Steps were taken to organize work on the science at Lisbon during the past year, which we shall watch with interest, and hope to hear of good fruits from the action. The science is not neglected in the Spanish universities, but there is no Society of Medical Jurisprudence in these countries that we are aware of.

CENTRAL AND SOUTH AMERICA.

We hope during the coming year to learn more of the

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progress of Medical Jurisprudence in the Spanish speaking countries of the Western Hemisphere and the Islands, and to come into nearer and more intimate scientific relations with them. We do not believe that any Medico-Legal Society, common to lawyers and medical men, yet exists among them.

ORIGINAL PAPERS.

Members desiring to contribute papers should address the President. More are now offered than can be received, but that should not limit the number from which selections should be made. So far as possible preference will be given to members, but contributions from non-members are solicited, and must be conceded to be of great value, it is by calling for these contributions that cases occurring of interest come to our notice.

INTERNATIONAL CONGRESS OF MEDICAL JURISPRUDENCE.

I think the time has now come when this Society should take the necessary steps to hold a Congress of Medical Jurisprudence, in the City of New York, either in the fall of 1888, or the spring of 1889, for a full and complete discussion of the more important subjects now uppermost.

To this Congress we should invite as our guests, to be entertained by our members, during its session of at least three days, representative men from all countries.

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A Committee should at once be named, to agree upon the subjects of discussion, and to take the preliminary steps, to secure contributions and papers, from the most distinguished Medico-Legal Jurists who cannot attend in person, and to fix the date of the Congress. A committee should be named regarding proposed reforms in EXECUTION OF CRIMINALS now before our State Legislation.

Believing that this body, can do its best work through carefully selected Committees, I shall ask your authority to constitute them, for the various objects recommended if they meet with your favor.

GENERAL RECOMMENDATIONS.

Renewing the recommendations of my last inaugural address, as to the election of a State or National Chemist, under the pay of the Government, to be at the service of accused persons or the Government in criminal trials, and the establishment of the Morgue in this city on a scientific basis, after that of Paris, France, I congratulate the Society on its continued career of usefulness and prosperity, and shall hope to unite with officers and members, in the labors of another year, in that zealous spirit, for the advancement of the science, that has distinguished the previous labors of the body, and made the fame of the Society, conspicuous, during its career of a little more than twenty years since its formation.

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THE ATTITUDE OF LEGAL MEDICINE vs. THE DISEASE OF ALCOHOLIC INEBRIETY.

By Edward C. Mann, M. D., Brooklyn, N. Y.

President New York Academy of Anthropology; Medical Superintendent Sunnyside Private Hospital for Inebriates, the Morphine Habit and Diseases of the Mind and Nervous System.

The present law holds drunkenness to be no excuse for crime. The disease of dipsomania is not drunkenness. The state of intoxication is merely one of many symptoms of the disease. True dipsomaniacs are totally irresponsible for acts committed immediately before, during and after attacks, just as epileptics are; because of their intellectual condition before the paroxysm of inebriety, on account of the impulsive character of their actions, and on account of the toxic delirium with which it is often followed. The great reason why the dipsomaniac is not responsible is, *because he is not master of his desire to drink.* Even in his lucid intervals the dipsomaniac is not a normal man, and there is a modified responsibility attached to all his acts. *The dipsomaniac is a sick man to be cured, not a criminal to be punished.* Dipsomania, the great diagnostic mark of which is an irresistible craving for alcohol in some form, coming on

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at regular intervals of either day, week, month or year, as the case may be, may be hereditary and evolved with the natural evolution of a person's organism, or it may be due to post-natal conditions.

Paroxysms of dipsomania are generally preceded by depression, insomnia and excessive nervousness like the other insanities. What now is the real essence of this disease? It is deranged organic or special sensation or impulse, which manifests itself, not as in ordinary insanity by suicidal or homicidal impulse, or by the morbidly erratic feeling which misleads the judgment and conduct of the kleptomaniac, pyromaniac or nymphomaniac, but owing to the changing and misleading subjective impressions of the dipsomaniac, he is compelled against his will and judgment, by a blind, irresistible impulse, to seek, in excessive indulgence in alcohol, for the relief of this subjective, morbid condition of his nervous system. The craving is beyond the control of the patient. He cannot help it. His drinking is the product of disease. He is a sick man. He is misled and perverted in the exercise of his psychic powers by abnormal conditions of his brain and centric nervous system. I have seen dipsomania or alcoholic inebriety in its hereditary forms exhibit: 1st. An abnormal aptitude, requiring an additional excitant factor to develop it into active morbid expression. 2d. The inborn defect, so great as to require only the natural organic evolution of growth to reveal it; and 3d. Still greater, not requiring even this to unfold it. I have seen it displaying itself in

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states of organic retrogression and nerve instability, so extreme as to be perceptible at the earliest period, when the display of mind is perceptible at all; idiocy, imbecility and infantile insanity.

Morbid organic conditions, therefore, lie at the root of this disease. Take the case of a lady whose normal character is pure and correct, whose intellect is vigorous, who in her habits is most abstemious, who, as a rule, never drank anything stronger than tea, coffee or water. This woman becomes depressed without adequate cause, suffers from insomnia and suffers from great nervousness. Then comes on a craving or impulse for alcohol, and perhaps a fondness for low society. She drinks till she can drink no more, until intoxicated; perhaps drinks for several days; is then horror-struck and filled with remorse, and is perhaps ostracised by her nearest and dearest friends. Now, why has she done this? Surely not because she wanted the liquor and merely chose to indulge in alcohol to excess. She has obeyed an impulse or craving which she could not resist, which very likely she fought against. She could not, however, successfully fight against the subjective morbid change in her organism which caused the craving. That has to be removed, if at all, by a careful course of medical treatment and remedial restraint. That woman is not morally responsible, either for her paroxysm of dipsomania, nor for any overt act which she may commit in it, and she is liable to commit suicide, or homicide, or to become a kleptomaniac or a nymphomaniac. I have

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treated a score of just such cases, and am very sanguine about their cure. I think that law should respect and accept the teachings of science, when the latter declares authoritatively that dipsomania and alcoholic inebriety is a disease, the subjects of which are laboring under a species of mental alienation and not morally responsible. The subjects of this disease demand the protection of medicine and law, and not fine and imprisonment, and from my personal experience of sixteen years I cannot make my plea for them too earnest. The disordered impulse or craving for alcohol, and in like manner for chloral, opium and some other drugs, dominates the character and morbidly masters the reason and the conduct. My experience and observation show the frequent interchangeability of alcoholic inebriety with grave diseases of the nervous system and mind, in which the neuropathic diathesis prevails. The dipsomaniac tendency of the constitution in some families seems vicarious, with the acknowledged or recognized neuropathic. I have frequently seen one branch of a family show insanity, epilepsy or organic brain disease, and another reveal the neuropathic taint in dipsomania. The chief triumphs in the therapeutics of dipsomania, belong to the plan of treatment which places the patient under medical supervision and restraint, maintains the physiological tone of the vaso-motor system, and which reestablishes the perfect stability of the higher cerebral centres, the psycho-motor and the psychical, up to the point of their highest resisting power. Rest, diet and

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recreation are to be insisted upon, sleep encouraged and time be given for rest of body and mind. Rest is a condition of nerve repair and power, and want of rest causes much neurasthenia and brain disease. Depression, insomnia and nervousness in the inebriate must all be removed by proper treatment and a trained resistance of the nervous system to the disease brought about. The patient must be kept under treatment for months, until the nervous system becomes vigorous, well poised and adequately recuperated. A strong brain and a well-nourished nervous system is the state of physiological antagonism to the disease of alcoholic inebriety. Everything that tends to undermine nerve stamina and induce nerve disintegration must be stopped, and recuperative conditions and physical regeneration brought about in the inebriate by all the means in our power. We must teach our patient how to build up his brain instead of exhausting it. Alcoholic inebriety from post-natal causes is a preventable brain and nerve disease. Inebriates should be forbidden marriage *always*, both by public opinion and by law, for the disease will breed its like. *We need to stamp out the hereditary descent of organically defective persons.*

The world needs sound brains and vigorous nervous systems, and progressive men should work to this end, so that dipsomania and kindred neuropathic diseases may be stamped out and suppressed. As long, however, as the disease exists, let the subject of it occupy their proper medico-legal relation, which is one of irresponsi-

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bility deserving protection by the courts. I am not unmindful of the fact that rules of law must be framed with a view to protect the accused, as well as the community, but I fail to see that public policy requires that sick men should be punished.

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JEWS NOT ADDICTED TO THE USE OF ALCOHOL.

By Moritz Ellinger, Esq.

(Read before the Medico-Legal Society of New York.)

The intemperate use of alcoholic and vinous beverages has become one of the recognized vices of modern times. Statesmen and public economists have occupied themselves with the problem how to check the growth of a vice which has already assumed dimensions that foreshadow a threatening epidemic. In no country, however, has the agitation for a correction of the evil been carried with such forcible energy and persistency as in ours. Temperance societies have sprung up all over the country, and a party which presents almost as its single issue an uncompromising warfare against the manufacture, sale and use of intoxicating beverages is gaining daily in strength and influence. I must confess that in my opinion the formation of such a party is a misfortune, as it cannot fail to have an opposite effect from what its leaders and advocates intend. Temperance lectures, temperance sermons, temperance societies are proper. They appeal to the moral sense, to the innate manhood, and will act as a regulator for the gov-

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ernment of unnatural appetites. But the total prohibition of bounties which mother nature has vouchsafed to us will rather increase a desire for them than otherwise, and the fact that they are sweets which have to be tasted in secret will augment the passion. The paradisaical apple having been stamped as a forbidden fruit brought forth the tempting demon-snake, who proved stronger than the Divine command.

The Jews, who have an unbroken history for nearly 4,000 years, whose continuous pilgrimage from land to land and continent to continent made them inhabitants of every clime and brought them in close and intimate contact with almost every nationality on the face of the globe, are outside of the movement for the correction of the vice, the existence of which is so much deplored, and in which the eloquence, the earnestness, the power of some of our best leaders of society are enlisted. It is a recognized fact that they are singularly free from this vice, but are not total abstainers. As a general rule, they are good livers. They enjoy the gifts of God, but have been educated to keep within proper bounds. I will endeavor to assign some of the causes which, in my opinion, have made them a race of temperate habits and have protected them against the snares and wiles of the tempter who works such terrible havoc among all classes of society and breaks up families, whether they live in palaces or hovels.

One of the first causes is purely ethnological. You will find on an examination of the races that dwell in

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frigid, temperate and torrid climates that the former are more prone to imbibe strong alcoholic beverages than the latter. I say alcoholic beverages, such as pure alcohol distilled from grain and grape. The Scandinavians use the strongest kind of these beverages, and the next are the Celts. The England of former days was also a land where the drinking cup dominated the dinner table to an extent unknown in more southern latitudes. Probably one of the chief characteristic of merry old England was the fact that the majority of the Squires did not rise from the chair upon which they were seated while partaking of the meal, but from the floor where they had fallen in a drunken debauch. The German Knight gave an evidence of his prowess and physical strength by draining a bumper of the largest size at one draught, and a home in Ireland without the poteen would be a sorry place for the inhabitants to dwell in. The cup, though it does inebriate, nevertheless cheers. France, the country of light wines, has known very little drunkenness until the consumption of absinthe has added a stimulant which has produced disastrous effects that call for corrective remedies. Germany, the land of beer and beer brewers, consumes comparatively small qualities of "burnt water," and drunkenness prevails to a smaller extent than in England, Ireland and the northern countries. Russia and Poland, on the other hand, are dotted all over with inns that dispense strong alcoholic drinks, and the "Pope" is as much brutalized by it as the "Muschik." The farther south

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you come the greater is the sobriety of the people. The Italian drinks his light wine, but he does not intoxicate himself, and the Italian contingent of this continent is characterized by great sobriety. Mohammed forbade the use of wine and alcohol, and drunkenness is very little known in Mohammedan countries.

With the Jews the grape was looked upon as one of the most precious gifts of God and its enjoyment as one of the legitimate pleasures of life. "Wine gladdens the heart of man," says the Psalmist. "And Melchisedek, the priest of the most high God, brought forth bread and wine," we read in Genesis. There are many dispersed passages in the Talmud which point out the beneficent effect of a moderate use of wine and the harm wrought by an intemperate use. In Talmud Babli, (*Berachoth* 59) we read: "Wise people drink wine and it benefits them, but the ignorant masses are hurt by it." In *Yoma* we read: "If a man is virtuous, wine will do him good; if not, it will destroy him." Wine was used at the sacrificial offering of the Temple, and from there passed into the religious ceremonies in Synagogue and Temple. Sabbath evening a benediction was spoken over a cup of wine after the evening service, and the Friday evening meal, as well as every meal on Sabbath and festive days, was initiated with such a benediction. The father then tasted of the wine and passed the cup to his wife, after which it was passed to every member of the family that was seated at the table, also to the guests that happened to be there, as well as to the domestic help. At

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the ceremonial service on Passover eve it was a religious command to empty four cups of wine, and the congregation was enjoined to see to it that the poor were supplied with it. The practice of saying a benediction over the wine cup as one of God's precious gifts was in itself a corrective against the abuse of it. This in connection with the fact that the moderate drinking of wine was looked upon as an integral and indispensable part of the festive meal on days of rest, recreation and religious commemoration contributed no little toward inculcating the lesson, that God has granted the gifts of nature for use and enjoyment. All the social enjoyments centred around the home. The father was its high priest and the mother the divinity. The conclusion of the festive meal was invariably followed by the singing of hymns, and a prayer opened and closed the meal. Thus every Sabbath constituted a family reunion, and the repast partook of a religious character. Debauchery, lasciviousness, promiscuous gathering of the sexes were made impossible, and an unnatural appetite was curbed by the restraint of religious practice. Drinking, for the sake of gratifying a passion, became unknown, and this education carried on for centuries has made the Israelites a race of sobriety and practical temperance. Of course, these practices have gone out of date with modern Jews, but the Jews have retained the disposition incurred by the training of ages. Nevertheless, society may learn a lesson from it, and it is simply this, to leave the control of unnatural appetites to home influence and

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training, and impress the parents with the fact that theirs is the responsibility of their sons' and daughters' formation of character. Legislative enactments can accomplish very little, the example of father and mother, the education by the teacher and preacher, must do everything, and especially woman can exercise an overpowering influence in this direction, not by public agitation, not by the formation of praying bands, but by the quiet and determined influence which she wields at her home and in society at large. Let the drunkard be excluded from refined homes and society; let the young girl refuse to recognize the young man who is guilty of intemperate indiscretion; let her grace the public and private banquets by her presence, and let the women of the land preach incessantly against the practice of treating which is much the cause of the prevailing passion for drink. Of course the drinking saloons should be under legal restraint, and every proprietor held responsible for the drunkard who is supplied with liquor in his place. Deprive the saloon of its attraction by making the home more attractive by greater liberality. Do not preach a crusade against moderate indulgence, do not preach prohibition, but temperance. Keep within the legitimate and natural boundaries of reform and society can accomplish a great deal. But beware of handing over the question of temperance to the mercies of the politician. You consolidate thereby the material interests into a compact and determined body, and by the fanaticism thereby aroused make drunkards of persons that would

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otherwise keep within legitimate bounds. The house, the school and the church are the places for the promulgation of temperance; within these all efforts must be concentrated. Should you fail there you will in vain seek for the remedy within the halls of political lawmakers. You can educate the citizen to be a man of temperate habits, but you cannot legislate him into it.

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*THE MEDICO-LEGAL TREATMENT OF COMMON INEBRIATES.**

By L. W. Baker, M. D.,
Superintendent Family Home for Nervous Invalids, Baldwinville, Mass.

The healthy human organism has no need of alcohol, chloral or opium. These drugs are undoubtedly useful in conditions of disease but fulfill no necessary office in health. When their use is, for any reason, long continued they tend to establish a morbid habit which, from the changes produced in the cerebral centres, is extremely liable to pass the border line of self-control when it becomes a positive disease requiring medical care and treatment.

I shall not now discuss any of the causes, hereditary or otherwise, which lead to the formation of the alcohol habit. Neither shall I consider the early period of this habit, or those peculiar periodical outbursts of perverted nerve force, known as attacks of dipsomania. I simply desire to call attention very briefly to a single class of inebriates and to a later stage of the disorder, when, no matter under what circumstances its use was first commenced, the drug has produced its peculiar effects upon

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the nutrition, and perhaps structure, of the nervous centres whereby the alcohol habit becomes firmly established.

Here we have an entirely different condition of affairs from that present in the occasional drinker who chooses to drink now and then for social or sensual gratification only. A distinction must be made between the self-controlling vice of drunkenness, or acute alcoholism, and the irresistible impulse of disease. The danger of course is, that the moderate drinker will occasionally indulge to excess and later on become the confirmed inebriate, but when the desire for alcohol has passed beyond the power of self-control there is present a positive condition of disease, perhaps not always characterized by changes discoverable at the autopsy, any more than in many cases of insanity, but an abnormal condition of the central nervous centres exists which demands alcoholic stimulation. In the class here referred to alcohol is the cause of the diseased condition, the deterioration of nerve element produced by the drug is the cause of the continued desire for alcohol. The vicious circle is complete and until these facts are clearly recognized by our law makers and by the public at large our methods of dealing with the chronic inebriate will be as irrational and unscientific as they have been in the past.

I doubt very much if a confirmed drunkard was ever reformed by punishment. This idea carries us back to the time when insanity was regarded as an indwelling evil spirit to be driven out by chains and the lash. In-

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ebriety is not a crime to be punished, but a disease to be treated. We have for generations punished the chronic drunkard by fines and imprisonment, and still the great army of inebriates is undiminished by our efforts while the tax upon the community for its maintainance is simply enormous.

At the International Prison Congress in 1871 it was stated that not one in a thousand persons committed to jail for inebriety ever recovered. Before a committee of the House of Lords in England men of the largest experience testified that they had never heard of a case of reformation of inebriates from punishment by fines and imprisonment. This testimony is confirmed by prison authorities all over the country. In the vast majority of cases the first sentence is speedily followed by others. In 1879 Massachusetts punished by fine and imprisonment over 17,000 inebriates more than 16,000 of whom had been in prison before. Of the 56,000 inebriates coming under legal notice in New York in 1852 less than 1,000 were punished for the first time. All others had been sentenced before for the same cause. One man has been sentenced to Deer Island, near Boston, seventy-five times for drunkenness, and many cases have been known of men who have been sent to jails and workhouses from twenty to two hundred times for the same reason.

The penal treatment of inebriety pays but very little if any attention to the physical or mental condition of the inebriate. It removes the victim from his alcohol,

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but does not consider the weakened and diseased nervous system which has been caused thereby. Regarding him as a criminal it places him in association with the lowest felons by which the worst elements of his nature are aroused and strengthened. Ignoring the element of disease it neglects all the means of restoration to health which are so important in these cases, and surrounds him with influences admirably calculated to increase and perpetuate his malady.

The lower classes of our larger cities are, from the very nature of their education and surroundings, predisposed to the excessive use of alcohol, while the unhealthy physical conditions under which they live are fertile causes of disease. To transmitted or acquired degenerations is very frequently added the deterioration produced by alcohol giving a complication of diseases which no penal institution is competent to deal with.

Fines and imprisonment have thus far failed to cure or check the evils of alcoholism. Is it not, therefore, important that other means more in accordance with the truths of science should at least receive a fair trial? Instead of sending the chronic inebriate to the penitentiary as is now the custom he should be committed to an Inebriate Hospital, properly arranged for this special purpose. These should have legal powers of detention and control similar to those of our best asylums for the insane. They should be located on large farms, away from the cities, and should be supplied with the various industrial appliances for the occupation of the

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patients, and in charge of physicians who have made special study of the care and treatment of inebriates.

Every county should establish and maintain an Inebriate Workhouse Hospital and our laws should be modified so as to compel the commitment of inebriates to these institutions rather than to the county jail. In this way the unfortunate victim of the alcohol habit will be placed under the best possible conditions for his recovery and restoration to society, or if proved to be incurable he will thus be provided with an asylum where he will in a measure be self-supporting and prevented from further injury to himself or to others.

We humanely provide asylums for the chronic and helpless cases of insanity, why should we refuse similar provision for the incurable inebriate? Both classes need asylum care if for no other reason than to prevent the transmission of the insane and inebriate diathesis to succeeding generations.

The results thus far obtained from the hospital treatment of inebriety in both public and private institutions, are sufficient it seems to me, to warrant a more extended trial of this method by our State and municipal authorities.

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*THE MEDICAL JURISPRUDENCE OF INEBRIETY.**

By M. Louise Thomas.

I know of no question within the range of human thought so difficult of discussion and so impossible of solution as the "Jurisprudence of Inebriety," and if this was all of the subject before us to-night I should declare the task hopeless.

It is appalling to consider how much of legislative action has already been had, and to how little purpose to stem the tide of inebriety. We have laws to manufacture, and not to manufacture intoxicating liquors. We have low license and high license, and local option and prohibition, tax for revenue, Maine law, and to guard minors, and wives, and confirmed inebriates, and so many other forms of law that their aim is defeated as much by their number as by their general weakness. Friends of temperance shake their heads with sad forebodings, while those engaged in the traffic lift theirs in proud defiance, and thoughtful minds are led to doubt whether laws can be framed that will guard equally the individual and the state, punish the violator of law, and yet allow a just liberty to all.

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But, adding a third side to our angle and making it the "Medical Jurisprudence of Inebriety," we have a proposition which in symmetry of thought and reasonableness of purpose awakens a hope that even that stupendous evil, which, to paraphrase the words of another, is "the source of all human miseries," may not be entirely beyond control.

It is so reasonable to conclude that inebriety, in all its forms and every stage, is a disease, following distinct lines of tendencies, developments and effects, that I marvel it has not so stood upon our statute books from the first. Every symptom, from the awakened morbid appetite, through all its stages, down to final darkness and death, attest the helplessness of the victim, and call for the enlightened skill and guiding care of the wise physician. The wonder grows why leading temperance workers have not sooner perceived this point and called upon medical science, from whence their help must come.

I dare not declare with many others, most excellent people, that the desire for any and every sort of stimulating drinks is in itself altogether wrong and sinful. It may be so, but if so, then all laws permitting, licensing or countenancing the traffic are also sinful. We have no more right to license this than any other form of social crime or evil. It seems to me to be a natural appetite or instinct, the same as hunger or thirst or any other natural human desire, and the abuse of it is what makes the trouble.

It is found among all kinds and conditions of men, in

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the earliest savage tribes and among civilized races. It is expressed in a love of tea and coffee and high spices, as well as in the use of fermented drinks, wherein, not only the grape and the grains are made to do service, but also all the fruits, the milk of the cocoanut, and even the honey, that nectar of the flowers, food fit for babes, are made to yield by fermentation most active and virulent intoxicants. And still further, if public manufacture were wholly stopped by statute to-day, it would be found going on to-morrow in cellars and caves and hidden places of the earth until the public mind shall be educated to perceive and understand its danger as a promoter of disease.

It is the abuse of this natural appetite, then, and this ready ingenuity in gratifying it, together with a general ignorance of the fatal character of the disease, that forms the chief obstacle in the way of its removal and final cure.

Men are prone to over-indulgence in the things they desire, whether for rich food or for gold, or for any other seeming good, and may go to their destruction in any of these directions unless guarded by enlightened reason.

The learning and skill of the doctors is supposed to keep watch and guard over all conditions of life and death and disease, and to them is referred its most important questions. They declare that certain contagious diseases are in the air, or are approaching our shores, and straightway the law directs the ports to be guarded and all suspected cases to be kept apart. They say leprosy is a common danger, and the lepers are shut

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away at the public expense; they direct the treatment of the insane, and costly asylums are erected and sustained for their comfort and cure; they show pleuro-pneumonia to be dangerous, and the law says: "Wipe it out, even to the entire destruction of all infected herds, no matter what the money cost may be."

All these dangers together, and multiplied an hundred-fold, must yet sink into insignificance compared with the evils of inebriety, so fatal to its victims, so crushing to families, and so costly to the state. But when the same distinguished medical skill shall come forward and boldly and firmly declare that inebriety is a disease and only a disease, that it must be met and treated as a disease, that the patient must be cared for, restrained and cured, not only as in the cases already cited, but with infinitely greater care, and still further, as a means of prevention, that the young who are as yet untouched by its baleful influence shall be educated in the schools to know its true danger and to avoid it, not merely because the law says so, but because over self-indulgence in any direction is hurtful, then, and not till then, medical science and the law, walking hand in hand, may we hope that inebriety may be swept from the earth. Asylums, almshouses and prisons will no longer be needed, capital will be turned into clean, legitimate channels for the prosperity of the the whole people, and then shall come to pass that heavenly era, the promised millenium of "Peace on earth, good will to men."

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*PRISON EXPERIENCES.**

By Lucy M. Hall, M. D.,
Brooklyn, N. Y.

What makes the inebriate, or, in rough Saxon, Why do men get drunk?

Twenty years ago no one asked this question. Now there is hardly any one who is not asking it.

That every morning a vast army of people should arise in the possession of their sober senses, who before the day is over will, by their own deliberate act, become stupid, stumbling imbeciles, or frenzied, dangerous maniacs, has at last presented itself to the mind of the scientific world as a problem, and more, as a problem which requires solution. Following closely upon this has come the other problem, what shall we do with the inebriate?

Of more than two hundred inebriate women examined and subjected to the most careful scrutiny by me I found more than seventy who gave what seemed conclusive evidence that somewhere in their wretched history they had passed the point where self-control is lost, and poor human nature is left helplessly to follow wherever the temptings of a remorseless appetite may lead.

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Here is a woman, well reared, always sensitive and proud, once beautiful and rich, who, for a score of years has been making her dreary round, drunk to-day, arrested and sentenced to-morrow, forlorn, hopeless, deserted by friends and foes alike, one of humanity's dregs, and yet maintaining a sort of remnant of her old-time stateliness and refinement of manner, when the prison doors are barred between her and her tempter. Every shadow of her perception of self-control has long since passed away. The sight or odor of intoxicating liquors throws her into a state of frenzy as loathsome as it is uncontrollable. Her moral sense is absolutely nil.

Here are two others, young girls scarcely sixteen years of age, one blue-eyed and sunny-haired, the other dark, but equally pretty and pleasing. What have these two in common with the poor wretch just described? Only this, they are drunkards. Never in their lives have they been able to leave untouched any intoxicant which was within their reach nor to desist from its use until completely stupified.

These are but three, culled from a motley procession. The two latter are hopelessly tainted in the ultimate cells from which their nerve centers were builded, for they are the children of drunken parents. Of the former, and the class which she represents, it is difficult to decide where the mental decadence reached a point from which return to normal standards became impossible.

We speak of the human will as though it were an independent entity, whereas this factor of the intellectual

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machine is really only the resultant expression of many opposing forces, none of which can be accurately weighed. Certain of these forces by some sudden, sharp or decided impression may, under favorable conditions, be so stimulated that self-control becomes easy, whereas under other conditions it would be impossible. Again, care and attention and a gradual upbuilding of the system will ensure a response from the brain forces, which will protect the inebriate from lapsing into his besetting vice.

In either case there are, no doubt, molecular changes in the brain cells. If these changes remain and acquire permanency, the cure is lasting; otherwise it is but temporary. But there comes a time in the course of every unreclaimed inebriate when no such response from the governing forces is possible.

There were many of the two hundred unfortunate women above noted, who, so far as human wisdom can penetrate the secrets of the human organism, gave no evidence of having lost, or of never having possessed, the nerve and will power which would enable them to control their tendency to inebriety. There were others who exhibited the peculiar nervous phenomena which mark the initial stage of irresponsibility, as the unstable state of the emotions, the lowered moral sense, the general breaking up of all that which goes to fortify character in the individual.

If a cure is not wrought before this condition becomes pronounced, there is little hope, and it is just at this

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stage that the heaviest censure is heaped upon the unfortunate wretch, still further degrading him who is already beaten down by a sense of his own degradation, and the help, encouragement and control withheld which might prove his salvation.

Thus the question: "Why do men—or women— get drunk?" resolves itself into a psychical and pathological study of the most profound and the most perplexing nature. Much has been achieved in the last few years, but the problem is yet but partially solved. In our eagerness to correct old errors we must not fly to an opposite extreme.

All the strength of the victim and of those who would rescue him is demanded in this, the grandest work, the mightiest movement of our century, the cure or care of the drunkard.

As there is pre-cancerous stage of cancer, a pre-phthisical stage of phthisis, a stage in which the tendency is strongly developed, but may be warded off by proper measures and the patient rescued from his impending doom, so in inebriety, *if the tendency is not too pronounced*, timely aid will save him. When the last stages are reached, and the poor drunkard has sunk to that beastly condition where he seems to have lost his kinship to humanity, when there is no sentiment left to which you can appeal, nothing in him which can be awakened in response to your desire to rescue him, the opportunity is lost. As well try to cure advanced cancer or phthisis as to cure him.

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To affirm that the habitual inebriate is as sane and responsible as is his sane and temperate brother is absurd. No man or woman believes it.

This does not imply that society is to be at the mercy of the frenzied and dangerous inebriate; it implies just the reverse. For in just so far as the inebriate is irresponsible, just to that degree is society responsible for him, and this responsibility can only be discharged by the putting forth of every effort on the part of society to protect and reclaim him.

It is needless to say how poorly and inadequately this duty is being discharged, how stupidly and egregiously the errors, which are the result of old and unscientific modes of thought, are being perpetuated in the accepted methods of dealing with these unfortunates.

Every boat which goes to Blackwell's Island, freighted with its throng of blear-eyed and dejected humanity, is a protest against these methods. Every boat which returns, with an equally numerous throng, like the others except that they are a little more degraded and forlorn, is a protest. The nine-tenths of this just liberated throng, who will be returned, battered and begrimed, so soon as they have had time to complete the cycle of another debauch, another arrest, and another summons to appear before "his Honor," are a protest in the same direction.

Every correctionary and penal institution in the land, its cells crowded with inebriate wrecks, or those who have become criminals because they were first drunk-

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ards,—every hospital and poor-house and insane asylum, all our burdened charities, all the rum-wrecked homes, the disgraced and ruined families, stand as a bitter reproach to the law and the administration of the law as it affects the inebriate.

Lack of time and space forbid a further elaboration of the subject. I can only repeat what with tongue and pen I have so many times reiterated. All legislation with regard to the inebriate should be for his protection. He should not be classed as a criminal nor treated as a criminal, for inebriety alone.

Upon the other hand, he should be regarded as irresponsible, if he fail to control himself, and his course of self-destruction speedily arrested. Every effort which science can suggest should be put forth for his recovery. Failing in this, he should be shielded, and his powers for happiness and usefulness conserved, by a system of control the least degrading, the most humane, but at the same time the most absolute and perpetual which human ingenuity can devise or human power enforce.

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BEST METHOD OF EXECUTING CRIMINALS.

By J. Mount Bleyer, M.D., New York.

The subject of capital punishment, and of devising means for rendering the infliction of the death penalty less offensive to the humane sentiments of the age, is deservedly receiving a good deal of attention, and in one state, that of New York.

The present Governor has taken a deep interest in the subject and reverts to it in his message, as follows :

CAPITAL PUNISHMENT.

In my first annual message in 1885 it was stated as follows:

"The present mode of executing criminals by hanging "has come down to us from the dark ages, and it may "well be questioned whether the science of the present "day cannot provide a means for taking the life of such "as are condemned to die in a less barbarous manner. "I commend this suggestion to the consideration of the "Legislature."

Nothing was accomplished, however, that year, but, public attention having been drawn to the subject, the Legislature, in 1886, appointed a commission to investi-

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gate and report to the Legislature the most humane and practical method known to modern science of carrying into effect the sentence of death in capital cases. This commission has presented a full report, which will undoubtedly receive the prompt consideration which the importance of the subject deserves.

After the message of 1885 the subject began to interest me. When I received from the commission an invitation and notice to help in the investigation of this subject I had already followed up some experimental research, and was able to submit a report of my experience in the matter.

I. GENERAL REVIEW OF THE SUBJECT.

The taking of human life by process of law has ever been regarded as a necessary exercise of the right of self-defense naturally vested in society, and an indispensable means of providing for the security and well-being of all its members: nevertheless, there has arisen in recent times a strong feeling of opposition to the theory and practice of legal retaliation, as far as the death penalty is concerned, and in particular against the bungling and barbarous method of capital execution in use from time immemorial in England, and thence derived to America death by strangulation, or by hanging. Moved by such considerations as these, some of the States of the American Union, as well as one at least of the governments of Europe—Switzerland—some years ago enacted

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laws abolishing the death penalty, but I believe that all, or nearly all of these States have since repealed such legislation, on the ground that, in the absence of the supreme penalty, the class of crimes known as "capital" was found to increase in a marked degree. But our present concern is not with the question of the retention or the abolition of the death penalty in general: we have to do only with the problem of devising a substitute for the gallows as a means of carrying out capital executions. Nor do we intend to consider any of the methods of capital execution in vogue in countries where the rope is not employed—as the guillotine, the garrote, shooting to death, etc.—but only to propose other methods, suggested by the advance of physical and chemical science, in modern times. For the rest, judging from the frequency of murderous crimes shown by criminal statistics from year to year, and by the records of the newspaper press, we find little reason to infer that the number of human beings to be done to death according to law will be in any notable degree diminished in the near future.

II. DEATH BY HANGING.

In view of this condition of affairs, it behooves the medical profession, which, more than any other class, has knowledge of the processes of living and of dying, to consider the means adopted by the legal authorities for taking lives which have been forfeited to the State; to decide whether or not these methods are humane, and to advise the law-makers concerning improvements, if

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any are necessary and possible. I write in the full conviction that the present usage is antiquated and barbarous, and that a substitute for it can readily be found which shall be free from objectionable features.

It is not my purpose to attempt an historical account of execution by hanging. Suffice it to say that it has long been the favorite method of putting criminals to death in the English speaking countries, and was doubtless adopted on account of its supposed superiority to others in point of humanity. That death by hanging is sometimes sudden, painless, and as free from hideous display as such a process well can be, is freely admitted; but that it is often slow, painful, and altogether horrible is known to all men. Occasionally the rope breaks, and the victim falls to the ground, only to be picked up and dragged again to the scaffold, to experience once more the bitterness of death. Once in a while the long drop effects decapitation, and we have the bloodiness of the guillotine, without its grim decorousness.

Last winter in England a condemned man was on the scaffold: the last word had been spoken, the bolt was drawn, but the drop did not fall. The convict was removed, the apparatus was tested, and again the intended victim was put in position. A second and a third time did the drop fail to act when released, and then the poor fellow, who had thrice looked death calmly in the face, fainted and was carried back to his cell. His sentence was commuted, and the people said Amen. So frequent are the bunglings and failures, that those who have the

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business in charge are always nervous till the affair is over. Said the assistant-warden, in response to a congratulation on the success of the recent hanging at Thomaston: "Yes, it passed off well; but we have been very anxious about it for three weeks. The last one we had here was not so successful!" Indeed it was not, as any one who witnessed it can testify. I have no hesitancy in pronouncing so imperfect and cruel a method of taking human life entirely unworthy of the civilization of the nineteenth century.

III. DEATH BY ELECTRICITY.

Last April, in the Legislature of Pennsylvania, a bill was introduced providing that the penalty for the crime of murder in the first degree should be death by electricity.

This method of taking human life certainly possesses all the requisites of a fitting mode of capital execution. It is decorous, involving no brutal or barbarous intervention of the executioner; it is humane, involving no prolonged agony for the condemned. The duration of an electric spark amounts only to an extremely small fraction of a second of time—about one five-hundredth part. The nervous system requires no appreciable length of time to act or to react. A puncture made with a pin on the arm is not *instantly* noted by the brain, or felt, as we say; a man may lose a finger or a hand by the action of a rapidly revolving circular saw, and feel no pain at the instant. In death by the electric current life is un-

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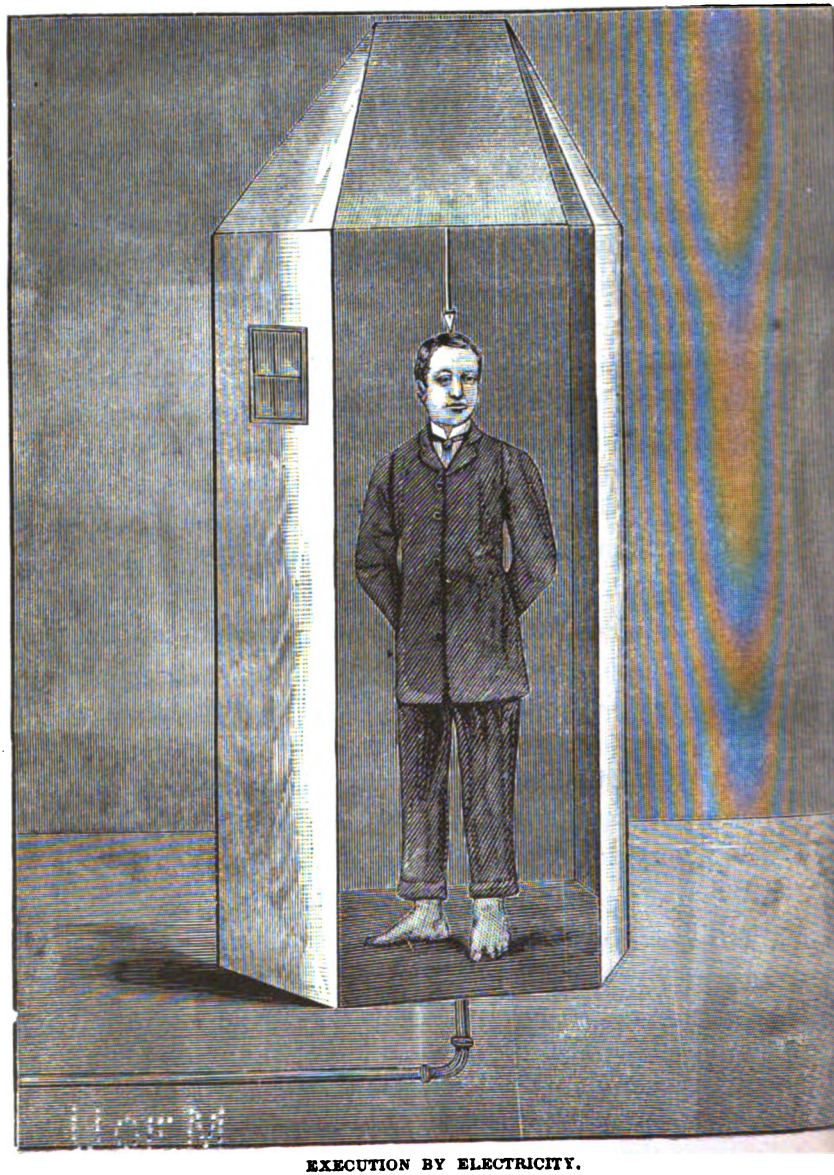

EXECUTION BY ELECTRICITY.

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doubtedly extinct before the afferent nerves can carry to the brain intelligence of the stroke that has fallen. It follows that death by such means—death by electricity —must be absolutely painless.

The mode of execution by electricity would be about as follows :

Electric wires connecting with the main wires which supply light through the city's streets, might be laid to the place assigned for executions, being so concealed and guarded as to be inaccessible to the condemned criminal or his friends, and otherwise protected against accident. At the assigned place a small wooden house, like a sentry-box or a watchman's hut should be erected. Spring locks, which close around both limbs, neck and arms, should be so attached to this hut that it will take but a few seconds to enclose the criminal in order that the body will not fall to the ground after death. A metallic plate connecting with one of the wires and serving as an electrode is placed even with the floor of the hut ; on this plate the criminal is to stand. A second electrode is introduced through the roof of the hut, and its end descends just so far within the hut as just to touch the top of the head when the criminal is introduced into the box. His feet should be bare, and his hair cropped short. When the time for the execution has come, the electrodes are to be tested to determine whether the current flows in sufficient force, and the whole apparatus is in proper

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working order. If so, the sheriff, or his deputy, or other representative of the law, touches a push-button, thus closing the circuit. The electric current passes through the body of the criminal, and even before the bystanders have consciousness of the act of pressing the button all is over.

Post-mortem examinations show the blood coagulated throughout all its vessels. Experiments made by me upon the lower animals prove that after death by electricity decomposition proceeds with extreme rapidity. Perhaps this circumstance is to be regarded as an incidental advantage of this mode of execution: it would tend to abridge, if not to abolish, the customary "wake" over the criminal's carcass.

This plan was tried on a large dog. The animal never made a perceptible movement or uttered a sound. Rabbits were experimented upon in the same manner. In every instance death was instantaneous and presumably painless.

IV. DEATH BY MORPHINE INJECTION.

Equally painless is death by the hypodermic injection of morphine; and in other respects this method of destroying life seems to be eminently suitable to be employed in capital executions.

Hypodermic, or Subcutaneous Injection is a simple method of introducing into the circulation certain drugs, especially anodynes; it is frequently resorted to by sur-

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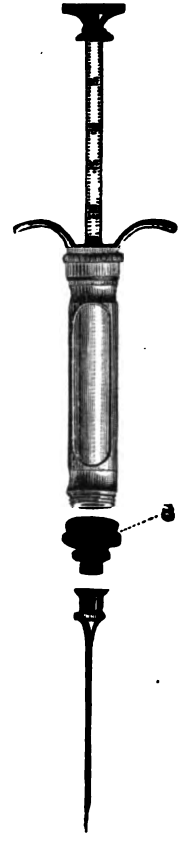
geons in cases where a more prompt and decided effect is desired than could be obtained by introducing the same medicinal agents through the mouth.



It was Professor Rudolph Virchow, of Berlin, who first absolutely demonstrated the incapacity of the human stomach to absorb the heroic doses of medicine prescribed by the physicians of the olden time. At present the microscopic chemist knows that certain medicines are never thoroughly absorbed by the human stomach, the ultimate molecules of these agents being too large to enter the minute absorbent vessels distributed over the stomach walls. Accordingly the preparation of medicines has undergone a vast change in our day, and now in most cases only their active principles are used. They are so perfectly manufactured that they readily pass from the stomach into the current of the blood circulation, or they are introduced under the skin by the hypodermic syringe. This instrument is a small syringe holding about thirty drops of liquid, and having for its nozzle a hollow needle. In giving an injection, the operator seizes between the thumb and the first two fingers of his left hand the skin, usually of the subject's arm, and holding the charged syringe firmly in his right,

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quickly thrusts the needle-point into the superficial underskin, at the same time forcing the liquid into the puncture. The needle is then withdrawn, and the operation is at an end.

The details of a capital execution by morphine injection would be about as follows :*

At the appointed time, the sheriff, accompanied by two deputies and the citizens prescribed by statute, enters the cell of the convict, who is lying on a couch. The sheriff administers six grains of sulphate of morphine under the skin of the felon, who, in a few moments begins to be drowsy. Soon he is overpowered with sleep, and the officer, to make assurance doubly secure, repeats the dose. Within half an hour the heart has ceased to beat, and the man is dead, having passed away without pain, convulsion, struggle, or consciousness.

The advantages of this method are its certainty, its painlessness, the freedom from the chance of horrible displays, the reduction of the dramatic element to a minimum, and its inexpensiveness.

(1.) No one will dispute the certainty of the result. If anybody fears that the dose is too small, it can be repeated over and over again, so that the end may be greatly hastened. There is no possibility of the rejection of the poison.

(2.) No suffering is caused to the condemned man, for

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* The engraving shows the method of administering morphine by hypodermic injection.

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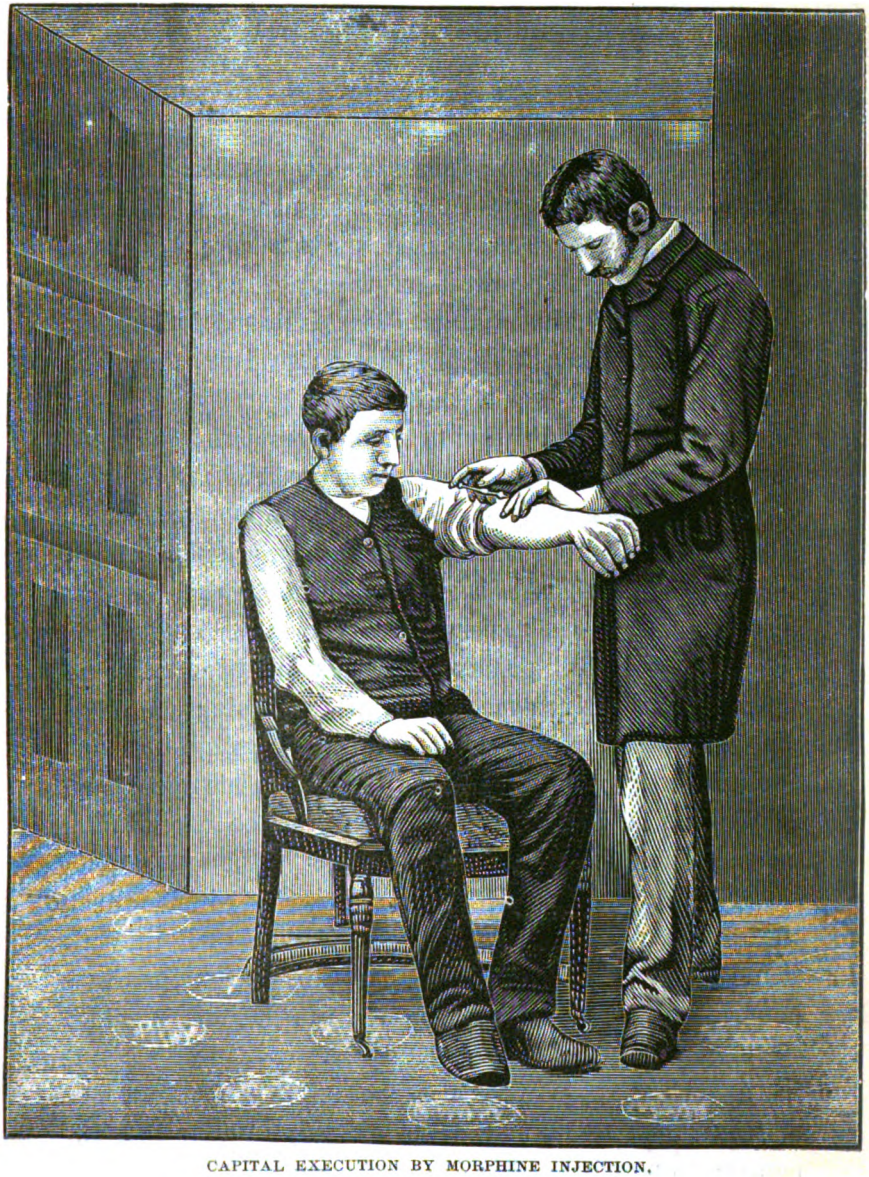

CAPITAL EXECUTION BY MORPHINE INJECTION.

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the slight sting of the hypodermic injection is unworthy to be called pain.

(3.) There are no convulsions, no decapitation, none of the hideous phenomena that often attend a hanging; the man simply goes to sleep, never to awake.

(4.) Many of the criminals who are condemned to death, finding that a change of punishment is impossible, make the most of their situation, and try to glorify themselves in the eyes of their friends by "dying game" on the gallows, and carrying themselves jauntily on the threshold of eternity. The exclusion of the public from executions has greatly diminished the opportunities for spectacular display; but the quiet and seclusion of the cell in which the fatal dose of morphine is taken reduces these chances to their very lowest terms. A villain on the scaffold, in full possession of his faculties, anticipating instant extinction, may appear heroic; the same man submitting to the trivial puncture of a hypodermic, and presently becoming too stupid to keep his eyes open, is far less likely to consider himself, or be thought by others, a hero.

(5.) The cost of erecting the gallows is considerable; that of a hypodermic syringe and morphine insignificant. It may be a small matter to discuss; but, after the State has been at the expense which a murder trial usually costs, generally paying the fees of the defendant's counsel, as well as those of the prosecution, it is not improper to desire that the last act of the tragedy may be as inexpensive as possible.

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Various objections are made to the proposed change, and these will be considered and answered *seriatim*.

(*a*) It is said that the sheriff cannot inject the morphine skillfully. If one but recalls the ease with which he himself learned how to use the hypodermic syringe, and the number of people in his acquaintance who acquired all too readily the necessary skill for administering doses to themselves, he will see the weakness of this objection.

(*b*) The slowness of the dying is thought to be undesirable. But in this, as in other affairs, the thing is quickly enough done, when it is well enough done. At the worst, the time will not be very long, and every minute will show that the man is sinking into a rapidly deepening sleep.

(*c*) It is suggested that convicts might be opium-eaters, or might train themselves so that their nervous systems would be incapable of receiving a fatal impression from morphine. To say nothing of the supposition that any person might not be poisoned to death by morphine, it is to be observed that the law requires that a considerable interval of time shall intervene between sentence and execution, and surely the State does not supply its prisoners with drugs to be taken for merely intoxicant effects. At all events the opium-habit would be cured, or its slave be dead—an arrangement to which nobody would object.

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V. DEATH BY CHLOROFORM.

The anæsthetic which has hitherto been most largely used in medical and surgical practice is chloroform, and this agent may cause death when introduced into the system by inhalation.

The symptoms produced by the inhalation of chloroform vapor may be divided into three groups of varying intensity. Briefly they are as follows:

First, a degree of relief from pain (if the subject has been suffering pain) with slight stimulation, the senses being but slightly affected.

Secondly, a stage of excitation and incoherence, wherein the subject is prone to struggle.

Thirdly, a stage whereof the most marked features are complete insensibility and narcotism, with relaxation of the muscular system. At first there is consciousness of all that is passing about the patient or subject; there is, however, dizziness and singing in the ears. Then the mental faculties are impaired; there is often excitement; the saliva is increased; the inhaler is pushed away; rigidity and spasms of the muscles may occur, and there is incoherent talk.

In the next stage there is insensibility to pain, and the eye-ball may be touched without causing flinching. If the use of the anæsthetic be pushed further the breathing becomes stentorious, the muscles quite relaxed, and the pupils dilated, while a still further increase of the chloroform embarrasses and then stops the respiration, and arrests the heart's action.

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Many cases of death from the vapor of chloroform have occurred, the fatal result sometimes happening very rapidly, from shock, syncope, or convulsions; in others again by way of asphyxia. The vapor of only 30 drops of chloroform has destroyed life in one minute.

Should chloroform be employed for inflicting the legal death penalty, the selection of the apparatus would depend upon circumstances, and on the judgment and the experience of the administrator of the drug. Whilst elaborately contrived inhalers are used in hospitals, none of these would be required in capital executions, the purpose of their contrivers being to render the administration of the drug as safe as possible. It suffices to bind over the mouth and nostrils of the subject a cloth saturated with a sufficient quantity of the chloroform. The subject should be placed in a reclining posture. As insensibility is more rapidly produced by this agent when the stomach is empty, no solid food should be given for at least six hours before the administration of the drug.

VI. DEATH BY PRUSSIC ACID.

Hydrocyanic, or Prussic Acid, on account of its energetic and rapid action, is one of the most formidable poisons known.

On being introduced into the system it rapidly enters the tissues, and acts chiefly on the nervous structures. Taken in a considerable dose it causes giddiness, faintness and nausea, a feeling of constriction in the chest, headache, mental confusion, disordered breathing, slow-

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ing of the pulse and muscular debility. Larger doses aggravate these symptoms, and produce grave dyspnœa and other signs of asphyxia. Taken in still greater quantity it produces death swiftly. Analysis proves that this agent, while depressing all the nerve tissues, acts first and chiefly upon the respiratory centres, which are momentarily excited and then depressed: there is weak respiration with long pauses, dyspnœa, convulsions and finally death by asphyxia.

VII. OBJECTIONS CONSIDERED.

1. It is objected that the publicity of an execution is diminished by the projected methods, and the chance to impress the people is lost. The present law allows but few to attend an execution, evidently with the design of avoiding publicity, for the effect on the community of an old-fashioned hanging was believed to be extremely harmful. A sufficient impression is made on the populace by the announcement of the fulfillment of the law; the chief purpose of which is the permanent removal of a worse than worthless member of society.

2. Some have said that they do not object to having felons endure some physical pain. Obviously the people do not entertain such views; for they have abolished torture and those forms of execution which are always painful, like crucifixion; and I believe they have retained hanging so long only because no plainly better plan has been advocated. The effort always is to make

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the death by hanging as sudden and painless as possible; and, when it is not so, we blame the executioner.

3. It is objected that criminals dread death by hanging more than they would that by electricity, morphine, etc., and thus are deterred from committing deeds which they would venture upon, if an easy poison or the electric current were substituted for the rope. This seems to me in the highest degree improbable; but the discussion of the point would inevitably lead to the re-opening of the question of the value of capital punishment, a subject which it would be improper to introduce here. It is well, however, to remember that the deprivation of opportunity for a dramatic exhibition would be so serious a matter to a convict that it would be almost like adding a sting to death.

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REPORT OF COMMITTEE ON BEST METHODS OF EXECUTING CRIMINALS.

To the Medico-Legal Society:

The committee to whom was referred the subject of

THE BEST METHOD OF EXECUTING THE DEATH PENALTY

respectfully report:

That in the consideration of this subject they have considered the several papers read before the Medico-Legal Society by AMBROSE TARDIEU, Dr. ALONZO CALKINS, Prof. J. H. PACKARD, of Philadelphia, Dr. J. MOUNT BLEYER and the report of Hon. ELBRIDGE T. GERRY, ALFRED P. SOUTHWICK, M.D., and MATTHEW HALE, Esq., Commissioners, made to the Legislature on January 17, 1888, which were by action of this society, laid before this committee at the February meeting.

Your committee are of the opinion, that the commissioners are entitled to the thanks of the legislature and the public, for the able and exhaustive labor, they have bestowed upon the subject. Your committee are of the opinion:

1. That the reduction by legislation in number among civilized States, of what are designated as capital offenses is in accord with enlightened civilization, and that its

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practical result, has been the diminution, rather than the increase of crime.

2. That it should be legally established, by legislative enactments; that the State in fixing penalties for crimes, has no right to inflict a vindictive punishment upon a criminal, in any spirit of vengeance or retaliation.

That the object and justification of punishment, should be to deter others, from the commission of crime.

3. That the provisions of our Constitution "that cruel and unusual punishments shall not be inflicted," should be enforced by appropriate legislation, and all existing statutes, repugnant to either its letter or spirit, be repealed.

4. That hanging should be abolished as cruel, and contrary to the public sense, of our civilization.

5. That as a substitute for the present death penalty, we would recommend.

1. Death by the electric current, or,

2. Death by hypodermatic, or other injection of poison, or,

3. Death by carbonic oxide gas injected into a small room in each jail, as recommended by Prof. John H. Packard (Med-Leg. Papers, vol. 3, p. 521), giving our preference to the first, or death by electric current.

6. That in our judgment executions, should be private, and not public.

7. That if it were possible, to prevent the publication of details of executions in the public press, it would be a public good.

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8. That the bodies of criminals, should be delivered to the medical schools, after execution for dissection.

Your Committee do not pass upon the question, of the propriety of inflicting capital punishment by the State, against which there is strong objection in the popular mind.

The report is intended to be limited to the subjects embraced in the Report, now before the Legislature of the State, and the papers read before this Society.

R. OGDEN DOREMUS,
CLARK BELL,
J. MOUNT BLEYER, M.D.,
CHAS. F. STILLMAN, M.D.,
FRANK H. INGRAM, M.D.
} *Committee.*

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*THE HEREDITARY EFFECTS OF INTEMPERANCE, AS IT EFFECTS RESPONSIBILITY, LEGAL AND MORAL.**

By Rev. William Tucker, D. D.

The brain is the instrument, not the cause, of mind. It conditions all the manifestations of mind in this state and in this life. Experimentally we know thought and intelligence, emotion and volition, only in connection with brain organism. This theory will cover and explain all the established facts of Physiology, Pathology, Psychology, Ethics and Religion. Whatever injuriously affects the material instrument of the mind, modifies its action, whether rational, emotional or volitional, as really as though it affected the spiritual cause of thought. Insanity, in all its forms, is a disease of the material instrument of mind, and as such can be reached by the same class of remedies used in the treatment of other nervous diseases. This has been established by medical experience and history in the treatment of diseased mental action. Not only is healthy mental action dependent upon a healthy condition of the brain and a healthy action of the vital organs, but a healthy action of the organs are as really and as truly dependent on the states

*Read before the Medico-Legal Society.

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and condition of the mind. This has been established by an induction as broad and reliable as that by which we established the truth of the other proposition.

There is constant action and reaction between the dual forces of man's nature. A drug received into the stomach and taken into the circulation, will affect all the revealed actions of the mind, and a thought received by the intellect affects the action of all the vital organs. In the one case the manifestation of mental action is controlled by the condition of the material instrument of intelligence; in the other, the vital organism is affected by the action of the mind on the nervous system.

Alcohol acts on the brain through the blood, and thus produces a diseased condition of the great organ or instrument of thought and intelligence. This injury to the brain is so great as to become transmissive and hereditary. It is transmitted from father to son and parent to child, and thus descends as an inheritance of disease from generation to generation.

As early as 1781, Erasmus Darwin, in his *Botanical Garden*, wrote: "It is remarkable that all diseases from drinking spirituous or fermented liquors are liable to become hereditary, even to the third generation, gradually increasing until the family becomes extinct." One hundred years after (1886) Dr. Crothers, of Hartford, in a paper on Inebriety and Heredity, wrote: "In these cases there seems to be, in certain families, a regular circle of degenerative diseases. Thus, in one generation, great

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eccentricity, genius and a high order of emotional development. In the next generation, inebriates, feeble-minded, or idiots. In the third generation, paupers, criminals, tramps, epileptics, idiots, consumptives, insane and inebriates."

Dr. H. P. Stearns makes this statement: "I may frankly say, that my own opinion is, that in a large majority of cases where individuals have daily or habitually used alcohol as a beverage, in any considerable quantity, and so as to become frequently inebriated, that there is established an abnormal state of the brain, which may be transmitted to offspring; and that this takes place through the elective action of alcohol affecting the vaso-motor portion of the nervous system, and through it the capillary portion of the circulation and ultimately the cell structure of the brain: that in consequence of this physiological action of alcohol upon the nervous system, when frequently and long used, there results a less sensitive and delicate condition of these constituent portions of brain surface, and that they become correspondingly less responsive to both objective and subjective impressions or influences, and that, therefore, there will result a less normal discharge of thought function in its various manifestations, moral and intellectual."

There are but few doctrines of physiology better established or more generally received as true, than the doctrine that affirms that the physical, intellectual and moral results of inebriation are transmitted to the children of the drunkard. The question of great prac-

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tical, ethical and legal importance is: To what extent does this hereditary taint affect the moral and legal responsibility of the children of inebriates suffering from the mental and moral weakness thus transmitted. It is a principle sound in law and ethics that ability is the measure of obligation and responsibility. No man is under obligation to do that which he has no ability to do. No one is responsible for a failure to do that which he could not do, or for doing that which he could not help. This is a well established principle in both morals and law. It is evident, therefore, that transmitted weakness modifies responsibility to the extent that it impairs ability for free mental and moral action. If the inherited weakness amounts to mental and moral idiocy or insanity, moral and legal responsibility are destroyed. If the inherited taint is no more than a degree of inherited feebleness of mind and will, then responsibility is modified but not destroyed. In that condition persons so affected have the ability to improve their physical, mental and moral health, and increase their brain power for thought and action by the use of proper means; and for the use of such means they are morally responsible. The function of education, physical, mental and ethical culture, hygeine, sanitary science, medicine, law and religion, is to enable us to overcome inherited weakness of body and mind, and develop physical, mental and moral power. Even those suffering from transmitted physical and mental disease may be benefited by the use of these remedial influences and agencies, so as largely to over-

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come and eradicate the inherited taint of brain and mind from which they suffer.

This being so, they are under moral obligation to use all the means that modern science and human benevolence places within their reach to improve their physical condition, and increase their mental and moral power. If they fail or refuse to do this, they are responsible in morals for the evil consequences of their failure to use the appliances to which they had access and which, if used, would have benefited them. This, if not wholly demented or insane, they have the ability to do, and they are under obligation to use it. While man is not under obligation to do that which he has no ability to, he is under obligation to try or make the effort to do that which he has not the ability to do. He has the ability to try, but not the ability to succeed. The ability to succeed comes by repeated trials and failures. It is developed by effort. It is in this way we acquire the ability to walk, talk, work, write, sing, play, think, reason and practice morals and religion. All sane men have the ability to develop this power. They are therefore under obligation to do it. The limitations caused by heredity does not remove this obligation, unless they amount to a total destruction of rational and moral power. Man has the power to modify and improve his organism, to change his environment, and to increase his capacity to work in nearly all directions. It is through this power that responsibility takes hold of those who suffer from inherited weakness.

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Man is not only under the law of heredity, but the law of variation and the law of progress. It is, therefore, possible for the weak to become strong, the feeble to develop power, the diseased to be restored to health, the ignorant to be educated, criminals to be reformed and sinners to be saved. It is this that makes law and medicine as remedial sciences possible.

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CRIMINAL JURISPRUDENCE.

By P. Bryce, M.D.,
Sup't. Alabama Insane Hospital.

The first part of the excellent paper by Doctor W. G. Stevenson on Criminality, in the last number of the Medico-Legal Journal, claims "that every psychical manifestation has a physical antecedent, and that cause and effect are as certainly established within the realm of mind as of matter." The irresistible conclusion of this well conceived and well written paper is, in plain language, that man is not a free agent in the ordinary acceptation of that term—that he is the creature of circumstances over which he has no more control than he has over the clouds that float over his head ; or, as another writer has put it, "the man is no more responsible for his moral disposition of good, bad, timid, courageous, false, truthful, cruel or kind, than he is for the color of his hair or the shape of his nose."

If these conclusions be correct :—if, as the school of Bain and Herbert Spencer on the one hand, and Flourens, Ferrier, Maudsley, Lester Ward and a host of others, on the other, have shown, that the freedom of the will is a psychological absurdity, it is high time that steps were taken to recast our methods of criminal jurisprudence on a safer and more equitable basis. It is none too soon to

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make the application of these principles to the individual in his relations to society at large—that is to say, to the law of the land, for the office of law, I take it, is to regulate the relations of individuals to each other and to society at large.

I will readily admit beforehand, that our rules of criminal jurisprudence must need undergo great changes before they can be made to conform to the conclusions above expressed, with reference to moral responsibility. The courts, to be consistent, must abolish the old ideas growing out of the metaphysical conception of mind—that the criminal had any power at the time of the commission of the criminal act to do otherwise than he did. They must recognize the fact that the crime committed was the culmination of certain impulses which the criminal had no more power to prevent than he had to set aside any of the well-established laws of Nature. These impulses were in turn the result of certain changes in the molecular arrangement of the brain, or nerve centres, produced by causes acting from without, and over which the individual had no control. The criminal should be regarded by the Court as the unfortunate possessor of an organization which incapacitated him, at the moment of the commission of the crime, from conforming to the requirements of the law. Whether this bad organization was the result of inherited weakness, or unfavorable social environments, bad example, defective education, or intemperate habits, will make no difference as to the moral value of the crime

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committed. Neither will differences in mental culture or capacity modify responsibility—the educated man, the lunatic and the idiot, all ought to occupy the same position in the eye of the law—in all cases alike the crime being the legitimate outcome of antecedent causes for which the individual is not morally responsible. To illustrate this important point, take the most revolting form of criminal conduct—assume that the human monster has committed a rape on a helpless child, and to cover up the crime has murdered his victim. The atrocity of the crime does not alter the conditions one iota. The man, devil though he be, has been himself victimized by the torrent of his lust, the result of undue excitability of the nerve centres presiding over the sexual sense. So great was the force of this sexual passion that his rational and controlling faculties were completely overpowered.

In the case of the insane man whose reasoning powers have been dethroned by disease; (for in law as well as medicine that constitutes insanity) or in the case of the idiot whose brain is incapable, by reason of its deficient organic structure, of furnishing him with mind sufficient to govern his appetites, the course is pretty clear, and the courts have no difficulty in reaching a conclusion; but from a strictly scientific consideration of mind, all of these classes—the idiot, the insane and the man of soundest mind, should be classified by the courts, in a moral sense, in the same category. In another sense, however, these several varieties of criminals should be

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differently dealt with, and all of them should be held to strict legal accountability for the crimes committed. Indeed, it is questionable if any two criminals, though guilty of the same offense, should be dealt with exactly alike; and the jurors recognize this principle of discrimination to some extent, as their verdicts show, notwithstanding the cast-iron rules which the law has seen proper to adopt. The question of capacity for reform should always receive the first consideration in dealing with the criminal.

The twofold object of all law, as I understand it, is first the protection of society, and second the reform of the law-breaker. Whenever, therefore, there has been an infraction of the law, the first consideration of the court should be directed against its repetition—what steps are necessary to prevent a recurrence of the offense. In a strict sense of the term there should be no acquittal for crime. Every offender should be held legally responsible—the insane and idiot equally with the sound in mind.. If insanity is plead, and satisfactory proof of its existence has been established, the Court should order the offender into safe custody until he has been restored, as is already the custom. If an idiot or an imbecile, he should be placed for life in a reformatory for insane criminals. There should be established in every State an institution for insane criminals where weak-minded persons or imbeciles who had proved themselves dangerous, should be confined for life. Criminals of sound minds, and of sufficient mental capacity

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to be reformed, should be both sequestered and punished, but the latter should never be otherwise than reformatory in its character, and one of its purposes would be to deter others from committing the same offense. Punishment from motives of revenge, or to produce needless pain is both cruel and unscientific, for reasons which I have already given, and should never be practiced by individuals nor permitted by the courts. If an individual of sound mind should be incapable of reform or improvement, as many of the worst class of hereditary criminals are, he should not be punished at all, but confined for life; and it is quite consistent with my philosophy that in rare cases he should be painlessly deprived of life.

These views, if generally adopted, would lead up to other great changes in our criminal code. The kind of punishment and time of detention of criminals susceptible of reform should be determined by a commission competent to decide such questions, and not prescribed by statute, as at present. If the criminal should improve in conduct and power of control under the humane and judicious system of detention and reform which the State ought to adopt—if his conduct should be habitually good and the commission had reason to believe that a real reformation in the man's character had taken place, and that his detention had been sufficiently prolonged to deter others from repeating his offense, he should then be discharged from custody. Of course there should be limitations even to this power to discharge on the part of the commission, prescribed

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by statute; and there are some crimes so atrocious and detestable that it might be better for society at large that the criminal should die, or be confined for life, whatever his conduct or capacity for improvement might be. The principle to be kept steadily in view, however, is that all punishment for crime is to be either reformatory or deterrent, *never revengeful*. When the offender is incapable of reform, as is the case with the confirmed lunatic, or low grade of idiots, he should not be punished at all but should be confined for life in an institution for insane criminals. In the case of an inebriate or habitual drunkard who had committed a crime under the influence of liquor, he too should be subjected to disciplinary measures with confinement in a reformatory for criminals, and kept there five or ten years until he had conquered the habit for drink and had acquired sufficient self-control to be allowed to go at large. To acquit and discharge such dangerous characters on the ground of insanity, or for any other reason, would be equivalent to turning a dangerous lunatic or hereditary criminal loose upon society. To meet all the requirements of the case there should be prisons and reformatories for the different classes of offenders, so that the moral influence of such establishments should be of the highest order, and not as they now are, of an almost unexceptionably deteriorating and demoralizing character. What an encouragement to the poor, pitiable, unfortunate victim of a bad organization such a system as I have described would afford! What help it would give him in building up his

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moral character and fitting him for an honest, happy and useful life!

And now, Mr. Editor, I must apologize for the length of my letter, but it required time to present my views even in this crude and imperfect manner. I do not apologize, however, for the very extreme views I have here presented. They are the logical outcome of our advance within the last dozen or more years in scientific psychology, and whether they are accepted now or not, I am confident they will form the basis of a more enlightened jurisprudence in the future. They are scientific, and afford an easy solution to the many difficult and in fact, otherwise insoluble questions that are continually puzzling our judges and juries. By the law of Alabama, as promulgated in therecent very able and masterly opinion of Justice Somerville, in the case of Parsons *vs.* The State, the question of a knowledge of right and wrong, which has heretofore been the test of insanity, has been discarded, and the guilt or innocence of the offender is made to hinge upon his power of control, that is to say, in the language of the Justice, "if by reason of the duress of such mental disease the criminal had so far lost the power to choose between the right and wrong, and to avoid doing the act in question, as that his free agency was at the time destroyed." This is a huge advance over the old decisions of the courts, but it does not and never can get rid of the difficulties growing out of the admission that man is a free agent—that he has the power to act differently from what he does. Accept the

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theory of the subordination of all the mental processes, including the so-called will, to the general organism of the individual, and admit, as all the scientific men of the day do, that this will does not stand outside the range of natural causation—that it is not free and undetermined—and many of the difficulties which now beset this difficult question will entirely disappear, and we can then hope to build up a system of penal reform which promises the greatest possible good to poor, erring humanity.

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EDITORIAL.

Definitions of Insanity and Legal Tests of Criminal Responsibility of the Insane :

James G Keernan, M. D.:—

"Insanity is a morbid mental condition, arising from brain diseases, or disorder, or malformation, which perverts the mental relations of the individual to his surroundings, or to what from his birth, education and circumstances, might be expected to be such surroundings."

(Ewell's Med. Juris. 329.)

Henry M. Bannister, M. D.:—

"Insanity is a disease or defect of the brain, causing such disorder in the action of the mind, as to affect the individuals conduct, put him out of his relation to his surroundings, and render him liable to be dangerous, or inconvenient to himself or others. Under insanity are not usually included delirium of fever, or the direct effect of toxic agents, intoxicants, etc."

(Ewell's Med. Juris. 330.)

Supreme Court of New Hampshire, Bell, Chief Justice :—

"In an elaborate opinion, refused to adopt the rule laid down in Beverly's case, that the words *non compos mentis* import a total deprivation of sense, and that to avoid a deed, this condition of mind in the grantor must be shown ; holding, that every person is to be deemed of unsound mind, who has lost his memory and understanding by old age, sickness or other accident, so as to render him incapable of transacting his business and managing his property."

(Dennett vs. Dennett, 44 N. H., 531.)

As to responsibility the same court holds in the same case, "that although imbecility of mind may constitute insanity in the eye of the law, mental weakness may exist and the subject remain legally sane ; and being so he will be criminally responsible for unlawful acts done by him." (Ibid.)

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SIR HUBERT JEUNER FUST :—

"I am not aware of any case decided in a court of law, where moral perversion of the feelings alone, unaccompanied by delusion had been held ground, for invalidating or nullifying the acts of the person affected."

(Frere vs. Peacock, 1. Rob. Ecc., 442 (1846.)

SUPREME COURT OF CONN.:—

The court speaking of Moral insanity, says: "It is true that the courts have been slow to recognize this form of insanity as an excuse for crime, nevertheless that it exists, is well understood, and that in some cases it is clearly defined by medical and scientific men cannot be denied."

(Anderson vs. The State, 43 Conn., 515.)

SIR JOHN NICHOL :—

"It has been said * * * * that this partial insanity is something unknown to the law of England. If it be meant by this that the law of England never deems a person both sane and insane, at one and the same time, upon one and the same subject, the assertion is a mere truism. But * * * * if it be meant that the law of England never deems a party both sane and insane at *different* times, upon the *same* subject, and both sane and insane at the *same* time upon *different* subjects, there can scarcely be a position more adverse to the current of legal authority."

(Drew vs. Clark, 3 Add. Ecc., 79.)

Imbecility or loss of mental power existing to a certain degree, and from whatever cause arising, and although unaccompanied by frenzy or delusion, constitutes unsoundness of mind amounting to lunacy within the meaning of the English law.

(Regnia vs. Shaw, L. R. I. C. C. 145.)

SIR JAMES MACINTOSH, C. J. (1812):—

"On the trial of JOHN BELLINGHAM for the murder of SPENCER PERCIVAL, Sir James instructed the jury that in order to support the defense of insanity it ought to be proved by the most distinct and unquestionable evidence, that the prisoner was incapable of judging between right and wrong, that it must, in fact, be proved, beyond all doubt, that at the time he committed the act, he did not consider that murder was a crime against the laws of God and nature, and that there was no other proof of insanity which would excuse murder or any other crime."

(Bellingham's case, 1 Coll. Lun., 636, 671.)

This doctrine was approved by Lord Lyndhurt, C. B., in 1831.

(Rex vs. Offord, 5 C. & P., 168.)

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ROLFE, JUSTICE:—

"If the prisoner seeks to excuse himself upon the plea of insanity it is for him to make it clear, that he was insane at the time of committing the offence. * * * * The crime rests on him, and the jury must be *satisfied* that he actually was insane. If the matter be left *in doubt* it will be their duty to convict him, for every man must be, presumed to be, responsible for his acts, till the contrary be shown."

(Regina vs. Stokes, 3 C. & K., 185.)

SIMON FITCH, A. M., M. D.:—

INSANITY—Is Inco-ordination of the mental *faculties* and the *will*, consequent upon structural, or functional disorder of the brain, and is

A, Passivê; B, Active; C, Asthenic,

each form being either *a*, General, or *b*, Partial.

A, PASSIVE INSANITY.—The *Will*, uncontrolled by the incompetent Reason, *is dominated* by the insubordinate Faculties.

a. Melancholia. b. Passive Moral Insanity, Passive Monomania.

B. ACTIVE INSANITY —The *Will*, misdirected by the depraved Reason *viciously impels* the turbulent Faculties.

a. Mania. b. Active Moral Insanity, Active Monomania.

C. ASTHENIC INSANITY.—The brain enfeebled, or atonic, or defective, leaves the Faculties, Reason and *Will*, *torpid or inert or perverted.*

1. *Paralytic Insanity*, coincident with physical paresis.
2. *Dementia*, progressing to mental extinction.
3. *Idiocy*, cerebral organism, abnormal or incomplete.

DELIRIUM—Is temporary mental derangement, caused by direct action, or by reflex impression, in or upon the brain. The derangement may become permanent, or pass into insanity.

The Will, in the sane subject, is the executive expression of the Reflective power (judgment and reason,) and normally controls the inferior faculties (intellect and instinct).

Hallucination, (aluo, I wander.) The confused imagination invents, vigilant reason dissents.

Illusion, (in lusû, in sport.) The perverted senses misperceive, sluggish Reason is passive.

Delusion, (de lusû, in earnest.) The vitiated understanding misinterprets, excited Reason abets.

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JUDICIAL INSANITY (LUNACY)—Is unsoundness of mind, or of will, or of both mind and will.

I. INCAPACITY, unsoundness of *mind*, Inability to *think* aright.

II. INCOMPETENCY, unsoundness of *will*, Inability to *do* aright.

III. *Melancholia. Pernicious Dejection*, Overwhelming depression of mind and will with periodic exacerbations.

IV. MANIA, *Furious Madness*, Uncontrollable turbulence of mind and will with periodic paroxysms.

V. DEMENTIA. IMBECILITY, Prostration of mind and will, advancing to extinction of the faculties.

VI. IDIOCY. *Congenital Foolishness*, Disability of mind and will, owing to defective development of organs of thought.

Either of these forms of insanity may be partial, constituting Moral Insanity or Monomania.

ALLAN MCLANE HAMILTON, M. D.:—

"Insanity may be said to be an impairment of mind, manifested by intellectual moral-perversion, and due to physical changes of the brain, other than those produced by intoxicants, or the poison of fevers."

HENRY MAUDSLEY, M. D.:—

"Insanity is, in fact, disorder of the brain producing disorder of mind; or, to define its nature in greater detail, it is a disorder of the supreme nerve-centres of the brain—the special organs of mind—producing derangment of thought, feeling and action, together or separately, of such a degree or kind, as to incapacitate the individual, for the relations of life. Mind may be defined physiologically, as a general term denoting the sum total of those functions of the brain, which are known as thought, feeling or will. By disorder of the mind is meant disorder of these functions.

INSOMNIA.

We are pleased with what DR. J. V. SHOEMAKER says on this subject editorially in his journal:

Late eating does not interfere with sleep, provided the food taken be easily digestible, in which case it rather favors sleep. This is especially true with invalids.

Among the devices found to control insomnia, we may mention the water-

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drip. The sound of water dropping slowly and steadily into a pan, occupies and quiets the brain. This is the principle, on which we are told to count sheep going over a fence, and do any sort of automatic thinking, if such an expression be permissible. A former victim of insomnia cured himself by keeping the eye-balls looking down. Another kept rolling them in one direction, with good effect, repeating, meanwhile, a certain word or number. Long inspirations by the mouth, and expirations by the nostrils, conceiving the air as currents, has been found effectual. All intellectual exercise should be stopped half an hour before bed-time. A tumbler of milk, instead of the usual copious draughts of water, taken during sleeplessness, will often help to overcome it.

MEDICAL EXPERTS.

The same author says:

We feel that there is a precipitous impulse in young ambition towards the notoriety of appearing as an "expert" in some legal case, where the disposal of human life or fortune may hang upon our very lips. Nothing could be more unfortunate for the moral welfare, and professional standing of a man, than that he should allow himself, on the strength of mere average information, to be induced to deliver a medical opinion in a case requiring special research, observation and clinical experience. It is so manifestly wrong, that to be the purveyor of "expert testimony" ought rather to be shunned than sought by young practitioners.

Doubtless, there are honest men of meagre attainments, who are quite deceived as to their own ability to give expert testimony. This is deplorable, but a fault which it is hard to correct, though the best safeguards of ignorance in medical jurisprudence, lie to a certain extent within the reach of all.

* * * * * * *

He seeks, for example, to settle the question of mental responsibility. In such a case, let him beware of the jurisprudence, that is to offset his medicine. If he dread rebuke and ignominy; above all, if he be a conscientious man, let him never presume to know more than he does know. A shrewd cross question will certainly undo him, and he runs a risk of fatal inaccuracy which may involve tremendous results.

We recall a recent graduate who, without any asylum experience, set himself up as an expert in insanity cases, and wrote a treatise on Insanity, of which he knew practically little of his personal knowledge, all his learning acquired by reading.

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It is the duty of the judge to exclude expert evidence, unless the witness is shown to have actual and experimental knowledge of a practical kind on the subject about which he is called to testify.

A physician who has not had charge of the insane in asylums, public or private, should not be accepted as a witness in an insanity issue, no matter how many books on insanity he has read or written.

Actual contact with the insane and treatment of them is the thing needed.

A physician, as such, should not be permitted to give expert evidence upon a toxicological question, the answer to which involves a practical knowledge of and experience in chemistry. We may all know what the tests of chemistry are, by name and in theory. It is the practical, personal solution of these tests that fit one for the grave duty of testifying as an expert. Half the scandals that have come upon the medical profession, about doctors disagreeing, arise from allowing those to testify who are not experts, but who think they are.

The careful, conscientious, fully intelligent expert, seeking for truth, competent to recognize and discover it, on a subject he thoroughly understands, is rarely contradicted, except by doctors of the class DR. SHOEMAKER mentions, who, testifying in a murder trial regarding a fracture of the cranium, was unable, on cross-examination, to either name or locate, the bones of the cranium, in the region of the fracture.

We recall a doctor, who swore positively in a criminal

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trial in the State of New York, that he could distinguish and discriminate from blood stains on clothing whether it was human blood or that of a dog!

The courts are more to blame than physicians, in not enforcing the rules, and excluding the swarm of medical witnesses, offered as experts, who are not experts within the rule of law if properly enforced.

CLASSIFICATION OF MENTAL DISEASES.

DR. H. P. STEARNS, of Hartford Retreat for the Insane, contributes a carefully written paper upon this subject to the January number of the *American Journal of Insanity*, reviewing some of the earlier writers of the ætiological school of classification. He subdivides his studies into two classes or parts—Nomenclature and Arrangement.

In the former he remarks upon the nomenclature, which all the world has followed, and urges one based on ætiology, pathology, as far as possible. The term *monomania*, being differently understood, he claims as misleading, and suggests in its place *primary delusional insanity*. He objects to the term *Paranoia* as not based on any known principle of a true definition of a disease, that it has no relation to the ætiology, pathology, physiology or symptoms of the disease, and thinks it should be discarded as misleading.

After enumerating some of the difficulties in arrangement and the difficulty now, of making any classification at all satisfactory, until pathological knowledge shal

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more perfectly define brain lesions or changes, he submits the following as his idea:

TABLE OF NOMENCLATURE AND ARRANGEMENT OF MENTAL DISEASE.

A — SYMPTOMALOGICAL.

1. Melancholia.
2. Mania.
3. Folie Circulaire.
4. Dementia.
5. Primary Delusional Insanity.

B — ÆTIOLOGICAL.

1. Epochal, (Physiological.)	Insanity of Puberty.
	Climacteric Insanity.
	Senile Insanity.
2. Sympathetic. (Sexual.)	Puerperal Insanity.
	Masturbatic Insanity.
	Ovarian Insanity.
3. Toxic.	Alcoholic Insanity.
	Syphilitic Insanity.
4. Neuropathic.	Epileptic Insanity.
	Hysterical Insanity.
	Choreic Insanity.
5. Pathological.	General Paralysis.
	Insanity from coarse brain disease.
	Traumatic Insanity.
	Acute Delirium (Typhomania).
6. Other less frequent genera and species.	Phthisical Insanity. Rheumatic Insanity.
	Gouty Insanity. Pellagrous Insanity.
	Post febrile Insanity.

A very important paper upon this subject, of recent date, is that of Dr. Walter Channing, of Brookline, Mass., the Secretary of the Conference of American Alienists, held at Saratoga in September, 1886, to consider the question of a system of classification of mental disease as a basis for international statistics re-

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garding the insane, held on the invitation of the American member of the International Commission selected at the Antwerp Congress of 1885.

DR. CHANNING makes a thoughtful and elaborate study of the subject as it has been presented by the writers of the present century, giving, as deserved, much space to HASLAM, who wrote near its commencement, as throwing much light upon the cotemporary medical view of that era, and revealing so clearly the progress of scientific thought, and discovery of our century.

The works of Burrows, of Prichard, of Pinel, of Esquirol and of Heinroth are carefully considered and utilized by DR. CHANNING, in his lucid and masterly treatise, examining with each the known facts, and the value of his observations, by his surroundings and opportunities.

He then takes up the theory of *Jacobi* of the Somatic School of German Psychology, who proposed a purely physical basis of mental disease, and the later studies of Schroeder Van der Kolk, Korel and Skae, each of which he analyses, and brings the discussion down to the French International Congress of 1867, and the action of the Committee of the British Medico-Psychological Association of 1869, which he carefully reviews and criticises.

The past twenty years in Europe and ten in America, he considers as a period of greater activity and progress, this he analyses in groups, considering Griesinger, Maudsley, Hack Tuke, Batty Tuke, Auguste Voisin, Bucknill, and later Krafft-Ebing, Westphal, Schüle, Meynert, Clouston and Savage.

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Of these he gives preference to Krafft-Ebing and Clouston. He then takes up the Antwerp Congress and the various papers that came of it, commencing with that of Prof. Lefebvre, which was read at the Congress reviews the action of the Saratoga Conference, and explains how a unanimous result was reached, and the improvement made by the American alienists over the plan proposed by the British Medical Psychological Association, submitted by the English member of the International Committee. He submits the basis agreed upon at Saratoga, and gives many interesting explanations of the reasons which controlled members of thebody, especially the reasons for discarding the word "*monomania.*"

The basis agreed upon at Saratoga, which may be called "*the American proposed basis,*" was as follows:

1. MANIA.
   - Acute.
   - Chronic.
   - Recurrent.
   - Puerperal.
2. MELANCHOLIA.
   - Acute.
   - Chronic.
   - Recurrent.
   - Puerperal.
3. PRIMARY DELUSIONAL INSANITY (monomania).
4. DEMENTIA.
   - Primary.
   - Secondary.
   - Senile.
   - Organic (tumors, hæmorrhages, etc.)
5. GENERAL PARALYSIS OF THE INSANE.
6. EPILEPSY.
7. TOXIC INSANITY—(alcoholism, morphinism, etc.)
8. CONGENITAL MENTAL DEFICIENCY.
   - Idiocy.
   - Imbecility.
   - Cretinism.

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DR. CHANNING gives praise to the Swiss plan submitted by PROF. WILLIE, of Basle:

1. PSYCHOSES CONGENITAL. { Idiocy. Imbecility.
2. PSYCHOSES SIMPLE.
3. PSYCHOSES ORGANIC. { Psychoses Paralytic. " Senile. Other organic psychoses.
4. PSYCHOSES EPILEPTIC.
5. PSYCHOSES BY INTOXICATION—alcoholic psychosis and others.

Enough is stated to show that next to the plan proposed by the American Conference, he would place the one submitted from Switzerland as entitled to second place, as a basis for international statistics of the insane.

INSANITY AND ITS MEDICAL JURISPRUDENCE.

The Publishing Committee have arranged for the publication of the leading papers and discussions upon this subject that have been contributed to the Medico-Legal Society, in a volume which will be distributed among subscribers at a sum which will simply cover the expense of publication.

It will be furnished to subscribers at 50 cents in muslin, and 30 cents in paper, and it is believed will make a volume of about 200 pp. The papers, if all are published, will be by Drs. Stephen Rogers, Paul de Marmion, J. J. O'Dea, T. D. Crothers, Norman Kerr, Joseph Parrish, C. H. Hughes, E. C. Mann, L. W. Baker, L. W. Wright, Lucy M. Hall, and Mary Weeks Burnett, and on the legal and lay side by Clark Bell, Esq., Judge Noah Davis, Anthony L. Dyett, Esq., Austin Abbott, Esq., Morris Ellinger, Esq.,

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Mrs. M. Louise Thomas, Rev. Wm. Tucker, while the discussion will be by Drs. A. Jacobi, S. Waterman, Frank L. Ingram, Emmett L. Dent, Chas. S. Shepard, Frank L. Paddock, Dr. Isaac Lewis Peet, H. S. Drayton, W. G. Stevenson and many others. The work will be a notable contribution to the literature of the subject from a great number of scientific minds, and the whole edition should be at once taken by subscription among the members and those interested in the subject for general distribution.

Prize Essays.

Time Extended for Competition to June 1, 1888.—The Executive Committee have recommended to the Society, and it has been decided, to extend the time for presenting essays for competition, from April 1 to June 1, 1888, by reason of the large prospective increase of membership to the Society, from the various States and countries, under the proposed plan of Nationalizing the Society. More than sixty-seven active members have been elected since January 1, 1888, and, as this number is likely to be very largely increased by June 1, next, it was deemed an act of justice, to our new and prospective members, that the competition for the Prize Essays be extended to them, which could only be done by postponing the date of closing the entries. The competition will be in all respects upon the basis hitherto announced.

Nationalizing the Medico-Legal Society.

The movement meets with great favor. The Com-

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mittees announced in our columns will show who have its execution in hand, in the several States—nearly all the thirty-one names elected at the February meeting, and the twenty-four names at the March meeting, are from States outside of New York. It is open to England the Canadian Colonies and foreign countries. The Vice-Presidents for the various States and countries will be elected after the movement is farther progressed.

The large number of superintendents of insane asylums who have already united, illustrates the importance of the science to that branch of medicine, while the judiciary, the bar, and the body of the medical profession are recognizing the importance of the study of Medical Jurisprudence, and the claims it has upon public attention.

Jury Trials Before Commitment of the Insane.

The bill presented by the Society for promotion of the welfare of the insane, now before the Legislature of New York, provokes public discussion.

Dr. Talcote, of Middletown Asylum, voices the sentiment of a large majority of American superintendents of insane asylums, in opposition to making a jury trial a preliminary necessity to commitment.

The letter of Mrs. M. A. Berry, Sec'y of the Society, for promoting the welfare of the insane, published in the New York *Tribune* of March 11th, in criticising Dr. Talcote's views, makes some very strong arguments in favor of the measure. She claims :—

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1. The unanimous opposition of Illinois superintendents to the jury system so long in force there, has little, if any force with the people of Illinois, who have tried it long enough to be good judges of its practical working.

2. The continual, even if occasional, confinement of sane persons in asylums, is such a flagrant offense in the public mind against the legal and natural rights of the citizen, that we are forced to decide between the two evils in arresting unlawful commitments, as to which is the greater :

1. The commitment of sane citizens to asylums, so easy under our present system, or

2. The unlawful hardship of certain cases when an examination by jury trial would work great hardships to the insane and their friends.

We have never been able to bring our minds to favoring jury trial as a *sine qua non*, but we must concede that MRS. BERRY has by far the best of the argument in the pending discussion :

The situation awakens thought :

Why are asylum superintendents as a rule opposed to jury trials as a preliminary to commitment? They surely have peculiar facilities for observation, their experience is broad and wide, and their sincerity and motives cannot be seriously questioned.

There is from our standpoint little chance of substantial public good in the way of amendments to the lunacy laws, through legislative committees. It is a subject they do not understand, and about which they have not the time to inquire.

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They simply know our present system is liable to grave abuses. They recognize the excited condition of the public mind. NELLIE BLY and the New York *World* demonstrated how easy the sane can be committed. The danger is, of hasty, crude and ill-considered legislation, to meet the popular clamor.

The safer course would be for the Governor, or the Legislature, to refer the whole subject to a carefully selected Commission, charged with the duty of reporting to the next Legislature, or to the Governor, such changes in the lunacy laws as the public interest and safety require, which thus crystalized would doubtless receive legislative sanction.

BELGIUM AND THE INSANE CALLED CRIMINAL.

The Society of Mental Medicine of Belgium has devoted an extraordinary session, November 26, 1887, to this question. PROF. DR. HEGER, President of that body, opened the subject by an exhaustive paper. It was discussed at length by Dr. Lentz, Superintendent of the asylum at Tournai; Dr. Cuylitz, Superintendent of Asylum of EVERE; DR. SEMAL; Dr. Vermeulen, of the Board of Lunacy Commissioners; DR. PEETERS, Sup't of the Colony at GHEEL and PRESIDENT HEGER. It was decided to recommend the construction at TOURNAI and at MONS a special department for this class of insane, and to communicate their action to the Belgian Government.

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PERSONAL.

Dr. JULES MOREL has been elected secretary of the Belgian Society of Mental Medicine, and Dr. CRAENE, Superintendent of the Asylum of Courtrai, Vice-President of that body.

Mr. CLARK BELL has been elected honorary member of the Medical Jurisprudence Society of Philadelphia, of the Medico-Legal Society of RHODE ISLAND and corresponding member of the Societe di Freniatria of Italy.

Dr. JULES FALRET, of La Salpetrie, Paris, has been elected president of the "*Societe Medico Pysychologique*" of Paris.

Dr. CHAS. K. MILLS has been elected president of the Medical Jurisprudence Society of Philadelphia and John A. Clark, Esq., and Dr. HENRY LEFFMAN, vice-presidents; Paschal H. Coggins, Esq., treasurer, G. Milton Bradfield, recorder, and Dr. F. K. DERCUM, secretary of that body.

TO SUBSCRIBERS AND MEMBERS OF THE MEDICO-LEGAL SOCIETY.

VOL. 4. Medico-Legal papers is now in printer's hands. The Committee would feel obliged for copies of all unpublished papers, and members having same will please forward same to Committee or this journal.

New subscribers to Vols. 4 and 5 MEDICO-LEGAL PAPERS, at $3.50 cloth, $2.50 paper, are as follows:

S. B. Buckmaster, M.D., State Hospital for Insane, Mendota, Wis.
P. Bryce, M.D., Superintendent Insane, Tuscaloosa, Ala.

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Judge H. M. Somerville, for Supreme Court Library of Montgomery, Ala.
Dr. Horace Wardner, Superintendent State Asylum, Anna, Ill.
Dr. E. J. Kilbourne, Superintendent State Asylum, Elgin, Ill.
Law Association of Philadelphia, Pa.
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Please send to the JOURNAL copies of Nos. 1 and 2, Vol. I. A liberal price will be paid for same to fill existing orders They are out of print and are wanted to complete sets. It will greatly oblige the JOURNAL if members who do not keep complete sets would send us these numbers.

Members or subscribers desiring Nos. 1 and 2, Vol. I., MEDICO-LEGAL JOURNAL will please furnish name and address to this journal If at least fifty in number apply, these numbers will be reprinted.

Please send subscriptions for the new work on Inebriety, to cost fifty cents cloth, and thirty cents paper. The following subscriptions have been received:

Subscribers to "Medical Jurisprudence of Inebriety."

Clark Bell, 25 copies each.
Dr. Joseph Parrish, 5 copies each.
Dr. T. D. Crothers, 25 cloth, 10 paper.
Mrs. M. Louise Thomas, 4 each.
Dr. Norman Kerr, 20 copies, cloth.
Dr. T. L. Wright, 5 cloth. 10 paper.
Dr. Lucy M. Hall, 10 copies, paper.
Dr. Chas. H. Shepard, 30 copies, paper.
D. E. C. Mann, 25 copies, paper.
Dr. B. F. Crummer, Dr. Chas. Gardener, Dr. F. L. Round one copy each.

The dues of members residing out of New York have

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been reduced to $2 per annum, payable in advance, which members should remit to E. W. Chamberlain, Esq., Treasurer, No. 120 Broadway, New York.

No. 1, Medico-Legal papers is out of print. Those who desire it, to fill up their libraries will send name and address to this journal. If enough to warrant publication is received, same will be republished, subscriptions for series 3 and 4, of which a few copies remain, is requested.

Growth of Medico-Legal Society.

The admissions of members since January 1, 1888, has been seventy in number, a result unparalleled in the history of the body. These names, are of judges, lawyers and physicians in the front rank, from nearly every State in the Union and from England.

Of asylum superintendents, 12 have united; judges, 3; chemists, 2; lawyers, 21; medical men, 45, and scientists, 4.

The Society now has members in every State except Delaware, West Virginia, Tennessee, Nebraska and Oregon.

The indications are promising, that this increase will continue through the present year. Public attention is greatly attracted to Lunacy Legislation, the various questions involved in medical jurisprudence, and the extension of the study of these subjects into all the States of the Union, is a matter of great scientific interest and moment.

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AMERICAN INTERNATIONAL CONGRESS OF MEDICAL JURISPRUDENCE.

THE MEDICO-LEGAL SOCIETY of New York has decided to hold an INTERNATIONAL CONGRESS OF MEDICAL JURISPRUDENCE at which representatives from all countries will be invited to attend and contribute papers.

The immense progress made in this century in the sciences of biology, neurology, psychiatry physiology, psychology and toxicology have enhanced our knowledge of the functions of brain, nervous organization, and elevated medico-legal science to a higher rank than it ever occupied before. The application of justice is governed by a higher sense of humanity, with our increased knowledge of the physical organization of the human mind. The conviction has therefore gained ground, that medicine and jurisprudence must combine closer for a clearer definition, and the better understanding of the principles that are rooted in both branches of learning, in the exercise of functions which require practical application in the government of society. This is the special field of medico-legal science, and it calls for the most intimate relationship between the faculties of medicine and of law. Eminent men in both hemispheres have rendered great services in the elucidation of the great principles underlying medico-legal science. In most of the European countries forensic medicine is taught by great specialists attached to the universities, and the same is done in some of our own colleges, nevertheless, there is no uniform practice in the application of these principles to

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the administration of justice. The courts in Germany obtain the opinions of experts officially attached there, which are, however, often disregarded, and neither in this country nor in Europe are the courts bound by the professional opinions of the medical expert. The divergence of views must be greatly ascribed to the obscurity which still surrounds certain scientific facts outside of the medical profession, the necessary effect of the absence of intimate and close relationship between the faculties of law and medicine.

To bring about a nearer approach of the two learned professions in the interest of medico-legal science and a more uniform application of its principles throughout the civilized world, our Society has determined to invite the votaries of medico-legal science, the men who have attained eminence in the professions of medicine and law in any part of the world, whose voice will be heard with that respect which is accorded to authority, to meet at an international congress to be held in the city of New York during the year 1889 at such a place and time as will be determined later on.

In issuing this call we voice the sentiments of leading jurists and alienists, of prominent members of the bar, and the medical faculty of our whole country, and we may promise to all the gentlemen who will attend a cordial welcome by our citizens and members.

A congress like this will advance mightily, the cause of justice and humanity, and will pave the way for a clearer definition of the principles which should govern

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the administration of justice in our enlightened age. The intercourse between men eminent in their profession, the exchange of views between them, the treatment and discussions of questions that form an integral part of both law and medicine, by those, whose voices are recognized as the leaders of science, will form another link in the universality of all true science.

The Congress will hold a session of four days. Members of the Medico-Legal Society, will entertain as guests all foreign visitors—and arrangements will be made for reduced rates of ocean and railway travel, for those who attend from a distance.

The leading societies, home and foreign, who are pursuing kindred studies, are invited to send delegates.

The General Committee of Arrangements will be announced later, as soon as formed.

The Sub-Committee which now has the affair in charge, is composed as follows:

SUB-COMMITTEE ON INTERNATIONAL CONGRESS OF MEDICAL JURISPRUDENCE.

MORRIS ELLINGER, ESQ., Chairman.

Clark Bell, Esq. Dr. Isaac Lewis Peet, Stephen Smith, M.D.
Judge Noah Davis, E. W. Chamberlain, Esq.

The Chairman of the Sub-Committee, MR. MORITZ ELLINGER, is the Corresponding Secretary of the Medico-Legal Society.

Members of the Society, residing in the various states of the Union, or the CANADAS, will be entertained by the

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resident members, on the same footing as foreign delegates or invited guests.

All Active, Honorary or Corresponding members who will contribute papers, to be read at this Congress, will please forward their names and the title of their papers to the Secretary of the Sub-Committee or to the President of the Society, at No. 57 Broadway, N. Y. City.

Officers of Scientific Bodies, in sympathy with Medico-Legal studies, will please lay this announcement before the members of their societies.

All students of Forensic Medicine or its kindred and allied sciences, are invited to attend and to contribute papers to be read. We request you to inform us of your decision and of the subject which you may eventually desire to speak upon or the treatise which you may submit. The sooner you can communicate your pleasure to us, the more you will facilitate the labors of the committee who are charged with the necessary preparations for the work.

New York, March, 1888.

CLARK BELL,
President.

MORITZ ELLINGER,
Cor. Secretary.

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RECENT LEGAL DECISIONS.

Examination of experts.—A medical expert, testifying in a criminal trial, was asked whether "Maudsley's Responsibility in Mental Diseases." was a standard work. The question was asked for the purpose of showing the familiarity of witness with authors upon that subject. *Held*, that the question was properly excluded, on the ground that the opinion of the witness as to the merits and standing of the work would not tend to prove such familiarity. California Supreme Ct., People *vs.* Sutton, 15 Pac. Rep., 86.

A medical expert, on cross-examination may be asked hypothetical questions bearing upon the sanity of defendant, and based on a portion of the evidence for the purpose of testing his competency as an expert. Idem.

Weight of expert testimony.—In a trial for voluntary manslaughter, two physicians testified that they had examined for wounds on the head of deceased, one saying there was a fracture in a given position, and the other that there was no such fracture, and if there had been that he would have discovered it. *Held*, that the testimony of both was positive, and the rule of comparative value, as between positive and negative evidence, did not apply. Georgia Supreme Ct., Weeks *vs.* State, 3 S. E Rep., 323.

Insanity.—Under the decisions of California, moral insanity, as distinguished from mental derangement, is no excuse for crime, nor an exemption from punishment therefor. Cal. Supreme Court, People *vs.* Kerrigan, 14 Pac. Rep., 849.

On indictment for murder, where the defence is insanity, the Court may in its discretion permit counsel for the prosecution to read to the jury decisions of English and American Courts on such defence. Montana Ter. Supreme Ct., Territory *vs.* Hart, 14 Pac. Rep., 768.

Intoxication.—Upon the trial of an indictment for murder, evidence of the intoxication of the accused is admissible, upon the ground that, taken in connection with the other circumstances in the case, it has a bearing upon

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the question of malice, by showing the condition of mind of the accused at the time of the killing. Kentucky Ct. of App., Buckhannon *vs.* Commonwealth, 5 S. W. Rep., 358.. In such a case, evidence as to whether the accused had mind enough at the time of the killing to know right from wrong, and sufficient will power to control his actions is inadmissible. Idem.

Ordinances requiring statement by physicians of names of persons to whom liquor is furnished is void.—An ordinance passed by the Mayor and Aldermen of the city of Forsyth, subsequent to these acts, providing that all practicing physicians within that town or city should make monthly returns to the council, giving a statement of their business, and for whom they furnished liquors, and providing a penalty for its violation, was without authority and void. Turner *vs.* City of Forsyth, Georgia Supreme Ct., 3 S. E. Rep., 649.

Ruling of English Judges on Lunacy Experts.—DR. L. FORBES WINSLOW, of London, publishes a card in the *London Lancet* and *British Medical Journal*, of date of February 25th, complaining of contrary rulings of the English trial judges. He says he was examined as a medical expert in the Ramsgate Shooting case, at MAIDSTONE, before Mr. Justice MATTHEW, and that the medical men were asked whether at the present time the accused was of sound or unsound mind, on the primary question of his ability to plead. They testified that the accused was of unsound mind and the jury so found.

That he went from MAIDSTONE to LEEDS, as a witness in a similar case, before Mr. Justice DAY, who had ruled as shown by his shorthand note, as follows. By Mr. Waddy, counsel for prisoner: 2. Was he in your opinion sane or insane when examined this morning? To which question Mr. Justice Day remarked: "Experts are not to be asked questions which the jury are sworn to try." "You may ask matters of fact, as to what he saw or "heard, but you must not ask him whether he is sane or not. I am not "laying down this point with respect to this particular question of insani. "ty, but I lay it down as a rule by which I shall always be guided in all "cases where scientific or expert witnesses are called to give evidence."

DR. WINSLOW raises the question as to which is the correct ruling, and suggests that the English judges should meet, as in the MCNAUGHTON case, and agree on WHAT questions a medical expert might be allowed to answer in a court of law where insanity was the issue. T. L. F.

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TRANSACTIONS.

MEDICO-LEGAL SOCIETY, JANUARY SESSION.

Presidency of Clark Bell, Esq.

A regular meeting of the Medico-Legal Society was held Wednesday, January 11th, 1888, at the Hotel Buckingham. President Clark Bell in the chair

The minutes of the December, 1887, meeting were read and approved as read.

On recommendation of the Executive Committee the the following gentlemen, proposed by President Bell, were elected active and corresponding members respectively:

Active: S. Angie French, M. D., New York City; P. Bryce, M. D., Superintendent State Insane Asylum, Tuscaloosa, Ala.; C. A. F. Lindorme, M. D., Fort Reid, Fla.; Edward M. Hyzer, Esq., Janesville, Wis.; Frank K. Paddock, M. D., Pittsfield, Mass.; Chas. H. Shepard, M. D., Brooklyn, N. Y.; W. G. Stevenson, M. D., Poughkeepsie, N. Y.; Ossip Feldman, M. D., New York City; John W. Gibbs, M. D., New York City.

Proposed by Dr. Messemer: Wolfgang Goetz, M. D., New York City.

Proposed by Frank L. Ingram: Emmet C. Dent, M. D., Medical Supt. New York City Insane Asylum, Blackwell's Island

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Corresponding: Adolph Kallay, M. D., Carlsbad, Germany; Prof. Dr. Moritz Benedikt, Vienna, Austria; Dr. H. Laehr, President Society of Psychiatry, Berlin, Germany.

The amendment of the By-Laws regarding the proposed reduction of the annual dues of members residing outside the State of New York, the consideration of which was laid over from the December, meeting, was then taken up, and on motion put it was unanimously voted that Art. 3, § 2 of the By-Laws of the Society be amended by adding thereto the following: "The annual dues of members residing outside the State of New York shall be two dollars."

The resignation of Dr. S. N. Leo, Treasurer of the Society, was laid before the Society, and was accepted conditionally upon the election of his successor. Dr. Isaac Peet was nominated for the office, the election to take place at February meeting.

The officers elected at the December, 1887, meeting, were then duly installed for the ensuing year.

The President elect, Mr. Clark Bell, then delivered his inaugural address.

Mr. Morris Ellinger moved that the recommendations contained in the President's address be approved and adopted by the Society, and that the President be authorized and empowered to appoint the various Committees to carry the same into effect. Motion carried.

The Secretary, Mr. Albert Bach, in the absence of Dr. P. Bryce of Tuscaloosa, Ala., read a paper by Dr. Bryce,

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entitled "Criminal Jurisprudence." The discussion of this paper was deferred by reason of the other pressing business before the Society. It was moved by Dr. Morris Ellinger that Article 4 of the Constitution be amended by adding thereto the following as section 2 :

§ 2 The Society may also elect at the annual meeting, or at any meeting called for the purpose, at least one Vice-President for each State and Territory of the United States of America or for any State or Country having active members therein, who shall ex officio be members of the Executive Committee of the Society.

The Chair held that the amendment having received the approval of the Executive Committee, must lay over until the February, 1888, meeting, under the provisions of the Constitution and By-Laws, regarding amendments, etc., and it was so ordered.

Dr. W. G. STEVENSON in behalf of the committee on the death of J. M. Carnochan, submitted their report, which was approved by the Society, ordered on file and printed in the Journal.

President Bell announced the death of the distinguished French scientist, corresponding member of this Society, DR. ACHILLE FOVILLE, and paid a high tribute to his memory. Appropriate remarks were made by other members.

The President then introduced DR. OSSIP FELDMAN, who successfully made several experiments in mental phenomena, among them the following were especially interesting:

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1. Raising and lowering his pulse by the operation of the mind, the pulse being taken by Drs. Emmet Dent, Frank L. Ingram, W. G. Stevenson, Wm. F. Holcombe and others.

Dr. Feldman in successive trials accelerated his pulse from the normal pulse to the rate of 140, 160 and 200 per minute, taking it at higher rates for ten seconds of time each.

2. By force of mental power, the doctor dilated and contracted the pupil of his eye while a bright light shone directly upon it.

3. Dr. Wolfgang Goetz selected an object which he concealed in a room adjoining the parlors where the session was held. Dr. Feldman blindfolded and without contact with Dr. Goetz, found the object. Dr. Goetz, walking from five to twenty feet behind Dr. Feldman but not touching him. Then Dr. Feldman delivered the object to the person who had been mentally selected by Dr. Goetz, also without contact. The same experiment was repeated with a gentleman selected by the representatives of the Press who were present, with satisfactory results.

The following preambles and resolutions, were offered by Ed. W. Chamberlain, Esq.:

Whereas, Certain anatomical museums in the city of New York, some of them established for a number of years, have been summarily invaded, their contents seized, and their managers arrested on the charge that their exhibitions are immoral or obscene; and

Whereas, The value of proper exhibitions of anatomical exhibitions cannot fail to be recognized as useful for public instruction; and

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Whereas, We agree with Professor Agassiz, "that the time has come when scientific truth must cease to be the property of the few, when it must be woven into the common life of the world;" and

Whereas, There exists serious and widespread doubt as to the honesty and sincerity of the persons who instigate such raids as are referred to; and

Whereas, There seems to be in the community a superstitious terrorism which prevents fair trials of persons so summarily arrested.

Resolved, That a committee be appointed to investigate and to present their conclusions to the Society with all convenient speed, accompanied by such suggestion for the action of the Society as the committee may see fit to recommend.

It was moved and carried, that they be submitted to a Committee to be appointed by the President.

There being no further business before the Society it adjourned.

ALBERT BACH,
Secretary.

FEBRUARY SESSION, 1888.

PRESIDENCY OF CLARK BELL, ESQ.

The regular meeting of the Medico-Legal Society was held Wednesday, February 8th, 1888, at the Hotel Buckingham. In the absence of the Secretary, E. W. Chamberlain, Esq., was nominated secretary pro tem.

The minutes of the January meeting were read and approved. President Bell stated that the Society having approved of the recommendation regarding extending its membership into the various States and Territories of the Union; he had written various gentlemen upon the subject and had received favorable replies from a large

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number of gentlemen in various sections of the Union, so that he had no hesitation in saying that the plan would meet with general public approval. On recommendation of the executive committee the following gentlemen proposed by President Bell, were elected active members: Ex-Gov. Henry M. Hoyt, of Pa.; Dr. G. F. Cook, Supt. Oxford Retreat, Oxford, Ohio; Dr. Thos. O. Powell, Supt. State Lunatic Asylum, Milledgeville, Ga.; Dr. J. Draper, Supt. Vermont Asylum for Insane, Brattleboro, Vermont; Dr. D. W. Yandell, Louisville, Ky.; Mrs. Sophie McClelland, 53 Seventh Avenue, City; Middleton Michel, M. D., Charleston, S. C.; E. J. Kilbourne, M. D., Supt. Northern Hospital for Insane, Elgin, Ill.; Horace Wardner, M. D., Supt. Southern Hospital for Insane, Anna, Ill.; Dr. Milo A. McClelland, Knoxville, Ill.; Dr. D. W. Aldrich, Mayor of Galesburgh, Ill.; John H. Wigmore, Esq., 109 Washington Street, Boston, Mass.; Geo. B. Miller, M. D., 2053 North 7th Street, Philadelphia, Pa.; John M. Taylor, Esq., Vice-President Conn. Mutual Life Ins. Co., Hartford, Conn.; Dr. Arthur P. Luff, Lecturer on Med. Jurisprudence St. Mary's Hospital College, London; J. Hugo Grimm, Esq., 404 Market Street, St. Louis, Mo.; Hon. Robert S. Green, Governor of New Jersey, Elizabeth, N. J.; E. A. Grandin, Esq., 18 Broadway, New York City. Henry P. Gieb, M. D., Stamford, Conn.; Prof. V. C. Vaughan, University of Michigan, Ann Arbor, Mich.; Wm. Nelson, Esq., Clerk Board Chosen Freeholders, Paterson, N. J.; Dr. J. Mount Bleyer, 91 Second Avenue, New York; Prof. Edward

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Payson Thwing, of Brooklyn, N.Y.; Dr. Frederick Peterson of New York City ; Dr. T. R. Buckham, Flint, Mich.

The following gentlemen proposed by Dr. E. C. Dent : Edward E. Whitehorne, M. D., Assistant Physician Bellevue Place, Batavia, Ill.; Dr. Matthew D. Field, 115 East 40th Street ; proposed by Benno Loewey: Samuel P. Sterne, of Syracuse, N.Y.; proposed by Morritz Ellinger : H. M. Goldfogle, Esq., New York ; proposed by R. B. Kimball: Dr. C. P. Frost, Hanover, New Hampshire, were also elected active members.

Dr. Arthur P. Luff, 35 Westbourne Terrace, was duly elected corresponding member.

The question of the amendment of article 4, section 2, of the constitution, moved by Mr. Morritz Ellinger, at the January meeting, which had received the approval of the executive committee, coming up, article 4, was was amended as follows, by adding thereto the following as section 2 :

SECTION 2. The Society may also elect at the annual meeting, or at any meeting called for the purpose, at least one Vice-President for each State and Territory of the Union, or for any State or Country having active members therein, who shall ex officio, be members of the executive committee.

Letters were read from Monsieur Horteloup, President of the Medico-Legal Society of France, accepting with thanks the honor of corresponding membership ; from Mrs. Dr. Carnochan, expressing her gratitude for the honorable mention of her deceased husband's name in

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the report of the Committee. The President asked further time to announce the Standing and Special Committees. Granted.

J. Mount Bleyer then read a paper upon the "Best Methods of Executing Criminals," which was discussed by Dr. Peterson, Mr. E. W. Chamberlain, Dr. Ira Russell, Dr. Wm. F. Holcombe, and the President.

The President introduced the report of the legislative committee, upon the subject, which had been furnished by Hon. E. T. Gerry, Chairman, and Dr. Southwick, of Buffalo, a member of the Committee, and read a letter from Dr. Southwick, upon the subject. It was moved that the Chair appoint a committee to whom the paper, the report of the legislative committee and the whole subject be referred with a request that the committee report at the March meeting.

Prof. E. P. Thwing then read a paper entitled "Hypnotic Trance and Kindred Phenoma with Practical Experiments," which was followed by some experiments in hypnotism, of great interest, conducted by Prof. Thwing, upon two different subjects or sensitives. The paper was discussed by Dr. Peterson, Dr. Dent, Dr. Frank L. Ingram, and the President.

Dr. Ossip Feldman stated that he considered that the subject should be considered under four heads:

Physiological Hypnotism, Psychological Hypnotism, Medical Hypnotism—that is in its relation to mental and nervous diseases; and fourth, Hypnotism before the law.

The Chair was authorized to appoint a permanent com-

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mittee upon the subject of hynotism to consider the whole subject and report.

The paper of Dr. T. R. Buckham, M. D., "The Menopause in Relation to Insanity," and the paper of W. Thornton Parker, M. D., "The Prognosis of Pelvic Cellulitis," owing to the lateness of the hour were read by title.

The Society elected as Treasurer in place of Dr. S. N. Leo, resigned, E. W. Chamberlain, Esq., and Benno Loewey was elected assistant librarian, vice E. W. Chamberlain, resigned.

The Society adjourned at 11 P. M.

E. W. CHAMBERLAIN, *Secretary Pro tem.*

(MARCH MEETING.)

March 14th, Society met at Hotel Buckingham. President CLARK BELL in the chair. The storm prevented a large attendance of members.

The minutes of the February meeting were read and approved. In the absence of the Secretary, Dr. Frank L. Ingram was chosen Secretary *pro tem.*

On recommendation of the Executive Committee the following gentlemen, proposed by President Bell, were elected *Active Members*: Dr. Benjamin J. Baldwin, Montgomery, Ala.; A. H. Batchellor, Esq., Littleton, N. H.; D. R. Burrell, M.D., Supt. Brigham Hall, Canandaigua, N. Y.; S. B. Buckmaster, M.D., Supt. Wisconsin State Lunatic Asylum, Mendota, Wis.; Dr. D.

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M. Currier, Newport, N. H., Eugene Foster, M.D, Augusta, Ga.; G. Hurt, M.D., 1210 Olive street, St. Louis, Mo.; F. W. Higgins, M.D., Cortland, N. Y.; R. P. Huger, M.D., Anniston, Ala.; Orson Millard, M.D., Flint, Mich.; Judge J. C. Normile, Criminal Court, St. Louis, Mo.; R. J. Nunn, M.D., 11 York street, Savannah, Ga.; Hon. Henry Robinson, Concord, N. H.; Dr. James H. Southall, Little Rock, Ark.; Hon. Henry C. Tomkins, Montgomery, Ala.; Geo. D. Towne, M.D., Manchester, N. H.; Dr. J. N. Quimby, 582 Jersey ave., Jersey City, N. J.; Dr. King Wylly Sanford, Orange Co., Fla.; Dr. D. R. Wallace, Supt. Texas State Asylum, Terrell, Tex.; Dr. J. F. Walsh, 615 Market street, Camden, N. J. The following, proposed by Moritz Ellinger, were elected: Judge S. M. Erlich, 840 Lexington Avenue; Benjamin F. Peixotto, 39 Broadway; J. P. Soloman, Esq., 335 Broadway. Charles E. Hughes, Esq., of 346 Broadway, proposed by E. W. Chamberlain, Esq., was also elected.

On recommendation of the Executive Committee the time for sending in prize essays in competition for the prizes, was extended from April 1, 1888, to June 1, 1888, in justice to the large number of newly elected and prospective new members, uniting with the society, outside the State, under the plan of nationalizing the society, sixty-six active members having joined the society since January 1, 1888, and the prospective number being also large prior to June 1, 1888.

The papers of the evening read were:

1. *Possibility of Air in Heart in Cases of Infanticide,*

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by Dr. F.W. HIGGINS, of Cortlandt, N. Y. Dr. HIGGINS, unable to reach New York by reason of the blocking of all trains, the paper was read by Dr. S. ANGIE FRENCH.

2. *Some Experiments Relating to the After-Death Absorption of Arsenic*, by Dr. Geo. B. Miller, of Philadelphia. Dr. MILLER being also detained, this paper was read by Dr. FRANK L. INGRAM.

The discussion of both these papers was postponed. The paper annnounced of Dr. MARY WEEKS BURNETT on ALCOHOLISM, and the paper of Dr. D. R. Wallace, of Terrell Asylum, Texas, had not reached the President, being detained in the mails by the storm.

The Committee on Best Methods of Capital Punishment reported. The report was received, and after discussion by Dr. Frank L. Ingram and the President, was adopted unanimously. (This report appears in this number of the JOURNAL.)

The chair announced the various committees which he had been instructed to name (which appear in this number). The action of the President was approved.

On motion the meeting adjourned.

FRANK L. INGRAM,
Secretary Pro Tem.

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MASSACHUSETTS MEDICO-LEGAL SOCIETY.

ROOMS OF THE BOSTON MEDICAL LIBRARY ASSOCIATION.

February 1, 1888.

The meeting was called to order at 12:45 P.M. by President Winsor. Twenty-three members were present. Records of the last meeting were read and approved.

Prof. Fitz, chairman of the committee on preparation of a blank form of autopsy returns, made his report. He acknowledged the receipt of criticisms from various medical examiners, and proceeded to discuss them. They were mainly as follows:

I. The blank form is too full and complete.

II. It is not detailed enough.

III. Its phraseology might be improved.

IV. It does not give enough blank space.

V. It will aid the defendant.

Prof. Fitz stated that the committee had carefully considered the objections and answered them at some length. He said that he thought the objections could be met without changing the form, and recommended its adoption with a few unimportant changes. The word *inquest* should be left off the outer fold of the blank, and a declaration that autopsy was necessary inserted instead, just below the statement of name, age, etc. He moved the following for adoption by the Society:

I. That the society provides its members with copies

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of the printed form prepared by the committee, and a sufficient number of blank pages of corresponding make for use in recording the evidence furnished by a post-mortem examination.

II. It further recommends the use of such blanks in reporting to the judicial officers, the results of a Medico-Legal investigation, requiring a post-mortem examination.

III. A blank should accompany the above and should interpret the evidence contained in the record of autopsy, as well as include a statement of such additional facts, as were necessary to determine the cause, and manner of death, and the Committe recommends that the standing committee, be requested to prepare a blank for this purpose.

Medical Examiner Hartwell moved that the report be received and its recommendation adopted. Seconded by Medical Examiner Mead. Medical Examiner Pinkham suggested that a statement of the supposed time of death might be inserted with advantage. Should also have headings for rigor mortis and post-mortem discoloration. In the section on injuries would have headings for varieties of wounds, fractures, etc., would crowd printed headings farther toward left of form, and draw a heavy line to limit the blank space.

Medical Examiner Adams made some remarks regarding the phraseology of the blank form, and inquired of Dr. Fitz the use of the form. Dr. Fitz replied that such forms are used abroad as an aid to the medical examiner,

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the court and expert witnesses. He thought that it might be as useful here as there. Medical Examiner Presbrey believed in the use of a very complete system for aid to the medical examiner, but would object to such returns to the District Attorney.

Further discussion was made by Members Adams, Morse, Presbrey, Pinkham and Fitz. Medical Examiner Pinkham moved to lay the report on the table and take it up at the June meeting. Lost.

Medical Examiner Pinkham moved adoption of his suggestion as an amendment to the blank. Lost.

Dr. Fitz moves that the report be accepted, and that its recommendations be voted on *seriatim*. The motion prevailed and the society adopted I. and III., and rejected II.

A communication from the Secretary of the Georgia Medical Society, requesting co-operation in securing legislation favoring importation of surgical instruments, drugs and medical supplies free of duty, was laid on the table.

Medical Examiner Tower moved that the Corresponding Secretary be instructed to print 300 copies of the blank form for autopsy returns, and send three copies to each medical examiner belonging to the Society. The motion was adopted.

On recommendation of the Executive Board, Medical Examiner O. H. Howe, of Cohasset, was unanimously elected a regular member of the Society.

Medical Examiner Pinkham reported an interesting

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case of manslaughter from a blow on the temple which fractured a remarkably thin skull.

Voted to adjourn.

W. H. TAYLOR,
Recording Secretary.

MEDICO-LEGAL SOCIETY OF FRANCE.

We have just received the complete list of officers of the French Society for 1888.

PRESIDENT, Horteloup, (Judge).

VICE PRESIDENTS, { Dr. Langier, Demange, (Avocat).

General Secretary, Dr. Motet.

Secretary of the Sesions, { Dr. Le Blond, Dr. Socquet.

Archivist, Joseph Lefort, (Avocat).

Treasurer, Mayet.

PERMANENT COMMISSION.

Horteloup, (Judge),	Dr. Lutaud,
Benoit, (")	" Brouardel,
Boudet (Avocat),	" Blanche,
Joseph Lefort, (")	" Motet,
Dr. Lionville,	" Le Beauvais,

Dr. Pouchet.

AMERICAN ACADEMY OF ANTHROPOLOGY.

This Society offers a prize of $50 for the best essay, and proposes to hold a congress in this city next September, in which distinguished scientists from all sections will be invited to co-operate.

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TOXICOLOGICAL.

Some Experiments Relating to the After-Death Absorption of Arsenic.

By George B. Miller, M.D., Philadelphia.

During the past year considerable discussion has been produced, in regard to the question of the introduction of a poison after death, for the purpose of concealing crime, by the very strikingly illustrative case cited by Mr. Clark Bell in the June number of the Medico Legal Journal, for 1887, in reference to which case, this well-known jurist was professionally consulted. In the case above alluded to, three very extremely suspicious circumstances took place, tending to confirm the suspicion, that there had previously fallen many victims from arsenical poisoning, into whose bodies immediately after death was lodged (in the process of embalming) large quantities of arsenic. This method having been pursued in the foregoing instance, very naturally the chief interest does not centre around the introduction and recovery of the fatal agent, but manifestly extends itself, to the consideration of the very best methods, if any at present are at our command, of discriminating between *that* poison administered to a person before death, and *that* introduced into a body after the

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cessation of life's forces. In the *American Naturalist*, for February, 1886, and in the New York MEDICO-LEGAL JOURNAL for June, 1887, there appeared, in connection with experimental results, as gained by chemical analysis, a treatise somewhat in detail of the subject, showing how easy and favorable the conditions at times are, for a crime of such magnitude to be practiced by a designing person. The subject was re-investigated, partly with a view to corroborate former results, which clearly demonstrated the relation which arsenious oxide would assume to the *brain* very soon after it had been introduced, during the cadaveric condition, and also for the purpose of extending our observations to the spinal cord, and to the extremely important and totally ignored secretion; the urine. It has been suggested by Prof. Reese, in the MEDICO-LEGAL JOURNAL for September, 1887, that the presence of arsenic in the brain might possibly have been due to a direct absorption from the pharynx of the liquid regurgitated from the stomach; the substance thus gaining an entrance into the cavity of the cranium through the ethnoidal and sphenoidal cells, and inevitably impregnating the brain tissue. It should be remarked, in reference to this regurgitation, that being well aware at the time of the possibility as well as the undesirability of its taking place, and fully appreciating the relation which the stomach and æsophagus would bear to the pharynx, when one of the lower animals is placed in the horizontal position, precautionary measures were in our experiments adopted to guard against the accident,

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yet they proved to be of no avail. To eliminate any discrepancy, such as the above-named from the present work, for the introduction of the arsenical solution into every animal employed, the following procedure was devised: The gullet was exposed by making an incision in the median line of the neck just below the larynx. Into the æsophagus a longitudinal incision was made, a ligature placed immediately above the incision: into the opening thus made a tube was passed through the gullet into the stomach. After the gullet was tightly secured to this tube, the arsenical solution was poured down into this receptacle—the tube then withdrawn and the lower portion of the æsophagus tied below the incision. Hence we are justified in claiming, that all the poison recovered from any organ, could not have reached that seat in any other manner than by imbibition, or a soaking process from the place of deposition, *i.e.*, the stomach.

The spinal cord and brain were removed from every rabbit experimented upon, before the thoracic or abdominal cavity was opened. The spinal cord was exposed in the usual manner by making two parallel incisions from the cervical to the lumbar region in the median line of the back, and the section thus mapped out, removed by sawing through the laminæ of the vertebræ. From a rabbit buried thirteen days, the spinal cord, brain, contents of the urinary bladder, kidneys and liver were removed. Owing to the special attention which we desired to give to the spinal cord, brain and urine, these only were removed from a rabbit buried twenty-four days; also from

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a rabbit buried twenty-nine days, the spinal cord and brain were taken. No urine was obtainable. These organs and secretions were placed in separate, clean glass jars, for chemical analysis.

The process employed for the recovery of the arsenic being the following: The organ is cut in small pieces; hydrochloric acid and water added, and the mass heated very nearly to the boiling point on a sand-bath. Potassium chlorate is added in portions; the mass is now heated and stirred until all the chlorine is driven off and it becomes homogeneous. Allowed to cool, and transferred to a moist linen strainer, and strained until the filtrate is clear. The residue is well washed with water. The arsenious oxide having been oxidized by the potassium chlorate to arsenic oxide, is reduced to arsenious oxide by the addition of an excess of sulphurous acid gas. The mass is evaporated to twice the volume of hydrochloric acid used; cooled and filtered if necessary, and thoroughly saturated while warm with a washed stream of sulphuretted hydrogen for several hours, which will throw down the arsenious oxide, organic matter and sulphur. Filter and wash the residue until the washings are free from chlorine. The residue is then treated with a few c.c. of water containing ammonium hydrate, which dissolves the sulphide of arsenic, allowing it to pass through. The filtrate is evaporated to dryness on a water-bath, and the few drops of nitric acid which are added to destroy the organic matter, oxidizes the sulphide of arsenic to arsenic oxide. It is again evaporated to

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dryness, and repeated until the mass has a yellow color. After a small quantity of a solution of potassium hydrate and powdered carbonate of soda has been added, it is again evaporated to dryness. To the dry residue which is arsenate of potash, are added three or four drops of concentrated sulphuric acid, which chars the organic matter. Heat on a naked flame until all vapors of sulphuric acid cease to arise. After adding 25 c.c. of water and one drop of sulphuric acid to the pulverized residue, it is boiled and filtered, and the filtrate, which contains arsenic oxide should be perfectly *colorless*. For Reinsch's test the arsenic oxide should be reduced to arsenious oxide by adding an excess of a solution of sulphurous acid, the liquid then being concentrated until all the sulphurous acid has been driven off. In the analysis, the purity of the reagants used, was determined by subjecting them to appropriate tests, and repeatedly found to be free from arsenic.

EXPERIMENT I.

White rabbit, weighing 4½ lbs, on December 16, 1887, was injected sixteen hours after death with 100 c.c. of cold water, having suspended in it 4 grams of arsenious acid. Exhumed December 29, 1887. Length of interment, 13 days. After-death appearances.—The *brain* weighed 138 grains and was in a solid condition; the bones of the cranium being well knitted together. The *spinal cord* measured 17½ inches, and weighed 33 grains, presented nothing but congestion of its blood-vessels.

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The *bladder* was partially distended with 15 c.c. of alkaline urine; no yellow spots seen upon its surface. *Kidneys* were imbedded in a very *dry* mass of adipose tissue. Weight, 172½ grains. The *liver* weighed 1,182 grains.

CHEMICAL ANALYSIS.

Brain.—10 c.c., representing one-half of the final solution, when nearly evaporated to dryness, gave a steel-gray deposit on copper foil, strips of which, when heated in a reduction tube, gave a sublimate which was seen with the aid of the microscope, to consist of octahedral crystals. Remainder of arsenic oxide solution when poured into a Marsh apparatus, verified former test by giving a small, well-defined *mirror*.

Spinal Cord.—10 c.c., representing one-half of the final solution, gave deposit on foil of metallic arsenic; verified by heating strips in a reduction tube, when an abundant deposit of octahedral crystal was given. 10 c.c. of arsenic oxide solution when run into a Marsh apparatus, responded by giving characteristic stains on porcelain plate pressed against the flame.

Urine.—10 c.c., representing one-half of the final solution deposited steel-gray on copper. Heated in a reduction tube gave copious sublimate of octahedral crystals, plainly seen by the naked eye.

Liver.—2½ c.c., representing one-sixth of final solution, coated copper foil, from which crystals of arsenious oxide were obtained. 2½ c.c. of solution gave precipitate of arsenite of silver. 5 c.c. of suspected solution,

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gave a precipitate of arsenite of copper, known as Scheele's green.

Kidneys.—5 c.c. of final solution gave a dark deposit on copper foil. from which the characteristic crystals of arsenious oxide were obtained, being visible to the naked eye.

EXPERIMENT II.

White rabbit, weighing 3½ lbs. on December 16, 1887, 17½ hours after death was injected with 60 c.c. of cold water, having in suspension 4 grains of arsenious acid. Exhumed January 9, 1888. Length of interment, 24 days.

After-death appearances.—*Brain* in a solid state, weighed 109 grains. The *spinal cord* measured 6 inches and weighed 28 grains. *Urinary bladder* partially collapsed; contained only 5 c.c. of urine. The only yellow deposits observed were situated on the anterior surface of the left kidney, and on the inferior border of left lobe of the liver.

CHEMICAL ANALYSIS.

Brain.—Whole of final solution, when evaporated to dryness, gave a deposit on copper from which were obtained characteristic crystals. [The evaporation of the whole of the final solution was made necessary, owing to an accident which occurred in the analysis, in which nearly all of the arsenic oxide was lost.]

Spinal Cord.—10 c.c., representing one-half of the final solution, gave a well-marked coating to copper foil;

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portion of this foil, when heated in a reduction tube, deposited on the side of the tube a sublimate, which was found to consist, when examined with aid of microscope, of crystals.

Urine.—Final solution, on evaporation, deposited marked gray on copper, which finally turned to a black. On the side of the reduction tube there appeared, when heat was applied to the copper, a formation of exceedingly large crystals. [This was by far the best result of the series, in this animal.]

EXPERIMENT III.

White rabbit, weighing 3 lbs. on December 16, 1887, 17 hours after death was injected with 55 c.c. of cold water, having in suspension 4 grams of arsenious acid. Exhumed January 14, 1888. Length of interment, 28 days.

After-death appearance.—*Brain* in very good condition, weighing +100 grains. The *spinal cord*, measuring 7 inches and weighing 30 grains, was in a firm state. No yellow spots visible in abdominal cavity. No urine was obtainable.

CHEMICAL ANALYSIS.

Brain.—10 c.c. of final solution evaporated to a few c.c., deposited with difficulty. Strips of copper foil, heated in a reduction tube, gave octahedral crystals.

Spinal Cord.—One-half of final solution gave deposit of metallic arsenic on copper foil; on the application of heat to this foil, in a reduction tube, a deposit occurred,

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in which were seen, by naked eye, arsenious oxide crystals.

On examining critically the preceding results, we are doubtless justified in gleaning therefrom the following: That as the result of experimental research, we have come in possession of indisputable evidence, demonstrated by strictly scientific methods, of the fact, that when a poison is introduced into the stomach it can actually *imbibe*, *soak*, and *diffuse* itself into the various organs of the body, can be recovered from the *liver*, *kidneys*, *spinal cord*, *brain* and *interior of urinary bladder*; also that the chemical evidence should not be held in the highest esteem, and be given the place of first importance in all cases, as has hitherto generally been the case. It must be admitted that there are only very rare opportunities for the toxicologist to detect a discriminative method, between ante and post-mortem poisoning. But the microscopist, with his knowledge of the histological and pathological appearance of organs, may perhaps be able to discover, by rigid searching with his microscope, some permanent appreciable difference; for it is not improbable that there may take place certain *specific* changes in the histological constituents of an organ, due to the deposition of a substance like arsenic, through the medium of the blood circulation during life, which changes would not manifest themselves as the result of an after-death deposition.

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JOURNALS AND BOOKS.

REPORT OF STATE COMMISSIONER OF LUNACY, (N. Y.)—The Fourteenth Report of this officer made for the year 1886, transmitted to the Legislature March, 1887, reaches us just eleven months after it reached the Legislature. We feel sure that this remarkable instance of enterprise is due to the State Printer rather than to the State Commissioner We make a few extracts:

The total number of insane in all State institutions for 1886 is reported at 18,610.

A table is given of each year since 1875, when it was 6,975. The Commissioner estimates the annual increase as not below 650 persons per annum.

These insane are confined in three classes of institutions:

1. The four State institutions at Utica, Poughkeepsie, Middletown and Buffalo.
2. The Chronic Insane Asylum at Willard.
3. The asylum for Insane Criminals at Auburn.
4. The institutions in counties which have charge of acute and chronic insane—New York, Kings and Monroe.
5. The County asylums which have the care of their chronic insane.
6. The poorhouses required by law to send their chronic insane in one district of the State to Willard Asylum, and in another to Binghampton Asylum.
7. The licensed private asylums (ten in number), within the State.

The report is a resume of the financial and other operations in detail, of these various institutions with those of Idiots in the State, and of the work at the Randall Island School, the Syracuse Asylum and the State Custodial Asylum at New York.

The most important portion of the report is, that chronicling the steady progress made in the abolition of mechanical restraint.

Taking the past five years Dr. Smith says, that at the commencement of that period the Kings County Asylum was the only institution which had completely abolished all restraint. At the present time, (1886), to that asylum we may add the Asylum for Insane Criminals at Auburn; the New York City Insane Asylum, Ward's Island; Willard Asylum and Binghampton Asylum, and he adds: "In the other asylums restraint

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has greatly diminished," and "in the Hudson River State Hospital restraint has almost entirely been abandoned and may be said to be resorted to only for surgical reasons."

He also reports the gradual dimuntion of mechanical restraints in the County asylums, though not yet the abolition.

The report is very full and elaborate and is a credit to the State Commissioner. Its statistical information is of great value to science, and will be read with interest by alienists throughout the world, affording the most reliable, if not the only statistical knowledge of the workings of the various institutions of the insane in the greatest of the American States.

We presume that his report for 1887 has already been transmitted to the Legislature. We hope that proof sheets, at least, may reach editors, if a year is necessary to enable the State Printer to complete his work of publication.

THE RIVISTA SPERIMENTALE DI MEDICINA LEGALE, which holds a place among Italian magazines similar to that of the MEDICO-LEGAL JOURNAL in this country, comes to hand regularly each quarter. Its table of contents embraces leading articles upon topics of interest to both the medical and legal professions, reviews of recent medico-legal works and other matters of interest. In number 2, of Vol. XIII., will be found a most able article by Dr. SILVIO TONINNI, Director of the Insane Asylum at Girifalco, Italy, upon "Melancholia as a cause of voluntary manslaughter." We select this, not alone because it is an unusually able paper, but because it serves to show the general excellence of our Italian exchange. We wish the "Rivista" great prosperity and success.

THE VERMONT ASYLUM FOR THE INSANE—ANNALS FOR FIFTY YEARS (1887).—DR. DRAPER has rendered a valuable service to the history of the care of the insane in Vermont for the half century ending last year.

Anna Marsh, widow of Dr. Perley Marsh, founded by her will, in 1834, the Vermont State Asylum, and Dr. Draper has taken up this interesting history and traced through the fifty years since her death and the act of the Vermont Legislature incorporating the Vermont Asylum to carry out the provisions of her will in 1835.

A faithful record is kept of the labors of the pioneers in this institution, both of trustees and superintendents, and this work preserves what, had it not been compiled, would soon have been lost.

We commend this interesting record to the attention of Superintendents of the other States. Such records, such annals can only be well done by the men of the generation, or close to it, in which the scenes were enacted. It should be emulated and followed in many of the older States.

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The illustrations are very good, indeed. It only lacks portraits of its early Superintendents and Trustees which, if obtainable, would add greatly to its interest and value.

These Annals contain a history of the 36 years of the labors of Dr. W H. Rockwell, as Superintendent of this Asylum from his election in 1836 to the accident which disabled him from further service in May, 1872, and of the labors of his successor, Dr. Joseph Draper, who assumed the position of Superintendent February 16, 1874, to the present time, and will be read with interest by all who take any interest in asylums for the insane, and their welfare and management.

DIET IN RELATION TO AGE AND ACTIVITY.—By Sir H. Thompson, F.R.C.S. American from the English edition. (Cupples & Hurd, Boston, 1888.)

"Sir Henry Thompson does well whatever he does professionally," said an acute American observer to us, who spoke of the eminent medical man's practice, who had been under his care. He has deserved the same commendation as to the monograph before us. The work is for the man of society, of labor, of the professions, and not for medical men. It is good common-sense advice, and is at the same time a criticism on vegetarianism in excess, on the one hand, and the use and abuse of alcoholic stimulants on the other. We commend its perusal to lawyers, and those who live both active and sedentary lives.

INEBRIETY, by Dr. NORMAN KERR. H. K. Lewis, London, 1888.—We receive just as we go to press this admirable work of the most prominent of British physicians who has given the subject attention. A scientific treatise on Inebriety as a disease, is what is needed now that so much attention is given the subject.

It has arrested public attention everywhere. The Belgian scientists have given it great prominence.

The Medico-Legal Socity of New York devoted two sessions to its study. and will shortly publish its labors in a volume. The New York *Tribune* is contributing an enormous amount of information to the public, and Dr. Kerr's book comes most *apropos*.

It is a purely scientific treatise from a scientific medical man, and will make its way we feel sure, onto the shelves of many of our readers.

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Books, Journals & Pamphlets Received.

W. B. FLETCHER, M.D.—Trephining for Traumatic Insanity (1887).

H. A. BUTTOLPH, M. D.—Insanity its Nature Classification, Pathology, etc. (1887).

PROF. JOHN J. REESE.—Live Birth in Medico-Legal Relations.
"Suicide in its Relation to Insanity."

ALEXANDER WILDER, M.D.—The Ganglionic Nervous System.

DAVID DEMSAN STEWART, M. D.—Poisoning by Lead Chromate (64 cases).

SETH S. BISHOP, M.D.—Diseases of the Ear (5,700) cases). Operations for Mastoid Disease. Chronic Supurrative Otitis Media.

F. B. FULLER, M.D.—Constitution and By-Laws R. I. Medico-Legal Society, (1885).

ROBERT NEWMAN, M.D.—The Gavano—Cautery Sound and Hypertrophy of the Prostate.

CHAS. F. WINGATE, ESQ.—Fifth Anniversary Meeting Twilight Club.

N. DAVIS-COLLEY & W. HALE WHITE, M.D.—Guy's Hosp. Reports, vol. xliv. (1887).

HON. ELBRIDGE T. GERRY.—Report of Committee on Capital Punishment.

LIEUT.-GOV. JONES.—Important Public Papers and Bills.

J. C. WILSON, M. D.—Report Select Com. Phil. Col. Physicians (1887).

CHAS. H. SHEPPARD, M. D.—*Life in the Turkish Bath.*

J. DRAPER, M.D.—VERMONT ASYLUM ANNALS (1887).

HENRY VANDYKE, D.D.—The National Sin of Literary Piracy, (Chas. Scribner's Sons), (1888).

D. R. BURRELL, M.D.—Report of Brigham Hall for 1886.

W. M. TAYLOR, (Hartford)—The Medical Examiner in Life Insurance. Connecticut State Register.

JOHN F. BAKER, ESQ.—The Federal Constitution, (G. P. Putnam Sons), 1887.

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EDWARD COWLES, M. D.—Insistent and fixed ideas (1888).

THOMAS D. WRIGHT, M. D.—Bones of the Leg (Cupples & Hurd, Boston, 1888).

ISAAC N. QUIMBY, M. D.—Chairman Section of Medical Jurisprudence, American Medical Association.(1887). Introductionto Medical Jurisprudence.

CHARLES K. MILLS, M. D.—Treatment of Nervous and Mental Disease 1888).

IL PISANI.—Gazetta Sicula Di Scienze Mediche E Psicologiche Armo-VIII. Editors, GAETANO LA LOGGIA and BERNARDO SALEMI-PACE, Palermo, Italy.

PROGRESSIVE GENERAL PARISSE, by Dr. Giuseppe d'Abundo, Professor Medical Jurisprudence at the University, Naples, Italy.

IRVING A. WATSON, M. D., Secretary American Public Health Association.—"Lamb's Prize Essays."

1. Healthy Homes and Foods for Working Classes, by Prof. V. C. VAUGHAN.

2. Sanitary Conditious of Schools, by D. F. LINCOLN, M. D..

3. Disinfection, etc., against Infectious Diseases, by GEO. M. STERNBERG. M. D.

4. Preventable Causes of Disease in Workshops, and Means of Averting, by GEO. H. IRELAND, M. D.

WALTER CHANNING, M. D.—An International Classification of Mental Disease (1887).

CHARLES L. MITCHELL, M. D.—Should Physicians be Pharmacists (1887)?

E. W. CHAMBERLAIN, ESQ.—Whither Are We Drifting (1888)?

DR. NORMAN KERR. Inebriety. (H. K. Lewis, London, 1888.)

W. R. RODES, M.D.—Seventeenth Biennial Report Missouri State Lunatic Asylum. Fulton (1887.)

C. H. HUGHES, M.D.—The True Nature and Definition of Insanity. (Copies for distribution.)

PAUL SCHELLER.—Buchhandlung und Antiquariat. Ard. Kat. No. 11. (Berlin, 1888.)

DR. ARRIGO TAMASSIA.—Professor of Medical Jurisprudence, University of Padova, Italy.

Diagnosi della Morte per annegamento.

Rapport Tra L'Azione Postuma del Systema Nervosa.

Determinazione Cronologica Delle Maechie Sangue.

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Concernenti I. Cristalli di Emina.
L'Irrigidmento Cadaverico e la tempuratura del Corpo.
Docimasia, Gastrica.
Traumi Suil' Addome.
Ecchimosi ed Embibizione Cadaverica.
Sulla Possibile Occultazione del Fosforo.
Progetto del Cordice Sanitario, Italiano.
Produzione dei Cristalli di Emina.
La Stricnina e la Nicotinat.
Sull Azione Mummifcante del Cianuro di Potassio.
Dell Accoolismo.
Per la Medicina Legale.
In Causa di Infanticidio.

C. A. RICE, M.D.—Reports of East Mississippi Insane Asylum, (1885, 1886, 1887),

HON. WM. N. ASHMAN.—Presidential Address, (1888). Legal Aspects of Suicide. A strange homicide case by I. T. Eskridge, of Colorado.

THEO. W. FISHER, M.D.—Forty-ninth Annual Report Boston Lunatic Hospital, (1887).

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MAGAZINES.

NORTH AMERICAN REVIEW.—The table of contents of March number is very attractive. MR. ALLAN THORNDIKE RYCE has completely metamorphosed this journal. Twenty-two eminent names from all parts of the Union give their views on the new idea of "PERMANENT REPUBLICAN CLUBS." There are seventeen original articles over well-known names among whom we notice COL. ROBERT INGERSOLL, ANDREW CARNEGIE, MURAT HALSTEAD, SENATOR STEWART, EDWARD C. MANN and PROF. W. H. JOHNSON.

BRAIN.—The January number (1888), completes the tenth volume of this able and interesting journal, now the organ of the LONDON NEUROLOGICAL SOCIETY. The more important paper of the number is that contributed by DR. HUGHES BENNETT on MUSCULAR HYPERTONICITY IN PARALYSIS, which was discussed by DR. HUGHLINGS JACKSON, DR. BUZZARD, DR. FERRIER, DR. DENKIN and DR. HALE WHITE. Original papers from James Ross, M.D.; E. A. SCHAEFER, F. R. S., WM. THORBURN, M.D., on Folie a Deux, by D. HACK TUKE, M. D., Alex Hill, M. D., J. BLAND SULTAN, F. R. C. S., and BYRON BRAMWELL, M. D., with report of Clinical cases, book reviews and abstracts from British and foreign journals, complete a number of unusual interest to students of Neurology.

THE CHATAUQUAN.—The standard of this journal from a scientific standpoint is very high. It is the organ of popular scientific advancement, the importance of which can hardly be estimated, and the extent and value of which will be a surprise to all who investigate.

As a popular teacher it rivals if not excels, any other one means of higher education of the masses, and we confess to a genuine feeling of pleasure at the enormous strides made by the Chautauquan movement, of which this journal is the organ—under the lead of its editor, Theodore L. Flood, and its Chancellor, J. H. VINCENT, L.L.D.

The article of most interest to our readers, in March number, is by DR. TITUS MUNSON COAN, M.D., on the *Hypnotic Sleep*, a subject which is now arresting the attention of the scientific world on both sides of the sea, and on which a select committee of the Medico-Legal Society has been put forward under the chairmanship of Prof. Thwing, which will devote itself to the study of Hypnotism and its kindred phenomena.

SCRIBNER'S —March number opens with JOHN C. ROPE'S paper on "The Campaign of Waterloo," which will be concluded in April number. ROP-

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ert Louis Stevenson seems to be a regular contributor. H. C. Bunner concludes his romance of Natural Selection. Wm. F. Apthorp concludes his publication of the Mendelssohn's letters.

The publishing department of the journal has no rival, and its advertisements certainly exceed that of any journal in America.

Magazine of Amer. History.—Mrs. Lamb finds and furnishes more original letters of Washington, and exhibits a zeal and energy quite remarkable in the conduct of this journal.

The Overland Monthly.—Has an attractive table of contents. The raising of "The Earl of Dalhousie" is very interesting. So are the "Reminiscences of the Early Days of San Francisco," while the whole journal has a flavor of the Pacific as charming as it is novel and attractive.

Littell's Living Age.—Has no end of good selections. This is a most welcome weekly visitor in the household. Once we are used to it we know how best to prize and appreciate it,

The Theatre.—A charming feature has been the papers genial Harry Edwards has contributed "Among My Autographs." What actor of note has not Harry Edwards known? These delightful papers make the journal valuable to preserve, and we are glad to notice that it is offered in bound volumes.

Lippincott's.—The most interesting paper to our minds in this journal is the history of the legislation of Congress, that permitted women to be admitted to the Bar of the Supreme Court of the United States; told most graphically by one who was foremost in the struggle, Belva A. Lockwood, who was subsequently admitted to the Bar of the Supreme Court of the United States, and to the United States Court of Claims.

Eclectic.—Has its usual attractive table of contents. That which pleases and interests us most is Prof. Huxley's reply to the Bishops, entitled "Science and the Bishops," and S. H. Swing's paper on "Toussaint l'Overture."

The New Princeton Review.—The March number is very able. We particularly commend the article by Henry Calderwood, on "Ethereal Relations of Absolute Idealism and Naturalism," and "Law, Logic and Government," by Alexander Johnston.

Phrenological Journal.—There is ever much of interest in this journal, but the account written by Prof. Agassiz, of the Hypnotic experiments made upon himself as a subject, in Switzerland, is published by Mr. Chauncey H. Townsend in "*Notes Relatifs au Magnetisme.*"

Grip.—Our Canadian illustrated humoristic paper deserves to be placed in the front rank.

Mr. Bengough combines those rare gifts which make his journal conspic-

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nous for wit and humor, and his satirical cartoons on Canadian officials are models.

ANNALS MEDICO-PSYCHOLOGIQUES.—Editors, Drs. BAILLARGER and RITTI, Paris. This admirable journal is devoted to mental and nervous diseases, and the Medical Jurisprudence of Insanity. Dr. Ritti now edits the *Chronique*, which was before his death the province of ACH FOVILLE. The journal is the organ of the *Societie Medico-Psychologique*, of Paris, and the Editorial Committee is compesed of Dr. CHRISTIAN, Inspector-General of Insane; Dr. CONSTANS, Dr. Dagonet, of St Anne, Dr. FALRET, of La Salpetrire; Dr. Lamaestre, of Ville-Evrard; Dr. Motet, former President of the Society, and Dr. Voissin, of La Salpetrire. It should be in the asylum library of every American institution for the insane.

GODEY'S LADY'S BOOK.—If the *April* number is to be JENNY JUNE'S standard for the magazine, she aims *high*. When we saw the first act of STEELE MACKAYES "Anarchy" end with such an intensity of emotion we trembled for the author, because we did not see how it was possible to sustain such a high key. When we recall what did follow, we do not doubt that JENNY JUNE will make her sequel as brilliant as has that gifted disciple of Delsarte, in this the most intense of plays that has recently come upon the *American* stage.

THE FORUM.—There are two articles in the April number of this journal well worthy careful study by our readers; "*Creed, Craft and Cure*," by Dr. Meredith Clymer, and "*Hysteria of Sectional Agitation*," by Henry Watterson, Esq. We do not say that they are better or abler than the others, but they interest us more. This may be due, and doubtless is, to the subjects chosen, rather than to other causes. The *Forum* is splendidly sustained, and offers an attractive table of original articles.

PUCK AND JUDGE.—Are both out with Easter numbers as we go to press. *Judge* has made an unusually effective number.

THE COSMOPOLITAN.—Presents an attractive table of contents and is ably edited.

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HORACE WARDNER, M. D.

Horace Wardner, M. D., born in 1829, in Wyoming Co., N. Y., received his academic education at Alfred University, being a member of the class of 1848; graduated in medicine at Rush College, in 1856; was Demonstrator of Anatomy in the Chicago Medical College from 1859 to 1861; was Surgeon in the Volunteer Army from May 1st, 1861, to Sep. 1st, 1865, filling during that time the position of Regimental Surgeon, Surgeon of Volunteers, Medical Director in the field, and for three years Surgeon-in-charge of a large general hospital in the West. Was one of the first members of the Illinois State Board of Health, serving five years. Was President of the Board two years and resigned on account of other pressing demands upon him.

Since August, 1878, has been Superintendent of the Illinois Southern Hospital for Insane at Anna. When appointed, the Press spoke highly of Dr. Wardner. We make some extracts.

The *Cairo Bulletin*, August 7, 1878, said:

"A dispatch conveys the gratifying intelligence that Dr. Horace Wardner has been appointed by the Trustees of the Anna Insane Asylum, Superintendent of that important public charity.

This action will meet with the unqualified approval of

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all persons enjoying a personal acquaintance with Dr. Wardner and competent to judge of the qualifications indispensable to a successful administration of the affairs of the responsible position he has been called upon to fill.

His standing among his professional brethren is high and secure, and he enjoys, professionally and socially, their confidence and esteem. He is not new to the general duties of the place.

During the war he was placed in charge of the General Military Hospital at Mound City, and discharged his task with great credit to himself, earning a reputation for fine administrative ability and maintaining untarnished his reputation for integrity.

We are sorry we must loose such a man, but find comfort in the reflection that he leaves us for an enlargement of those duties which have for their object the most merciful of human aims—the relief and care of the helpless and suffering."

The *Real Estate Bulletin*, a Southern Illinois paper, under date of August 15, 1887, says: "Dr. H. Wardner, who has charge of this hospital, is one of the very few who combine the needed qualifications. A man of sterling integrity, an old and experienced physician with first-class reputation, and one who sympathizes with the unfortunate, he is willing to exhaust every means for their relief or cure. He is just the man to have charge of such an institution."

DR. WARDNER had won distinction in his profession before he assumed the charge of the State Asylum. His

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administration has been successful and he is now in the front rank of American superintendents in charge of asylums.

He has lately united with the Medico-Legal Society of New York, is a careful and conscientious student of mental science and attaches a high value to forensic medicine.

He is a ready writer on subjects connected with his specialty. A professional career of great usefulness in his profession is before this eminent alienist.

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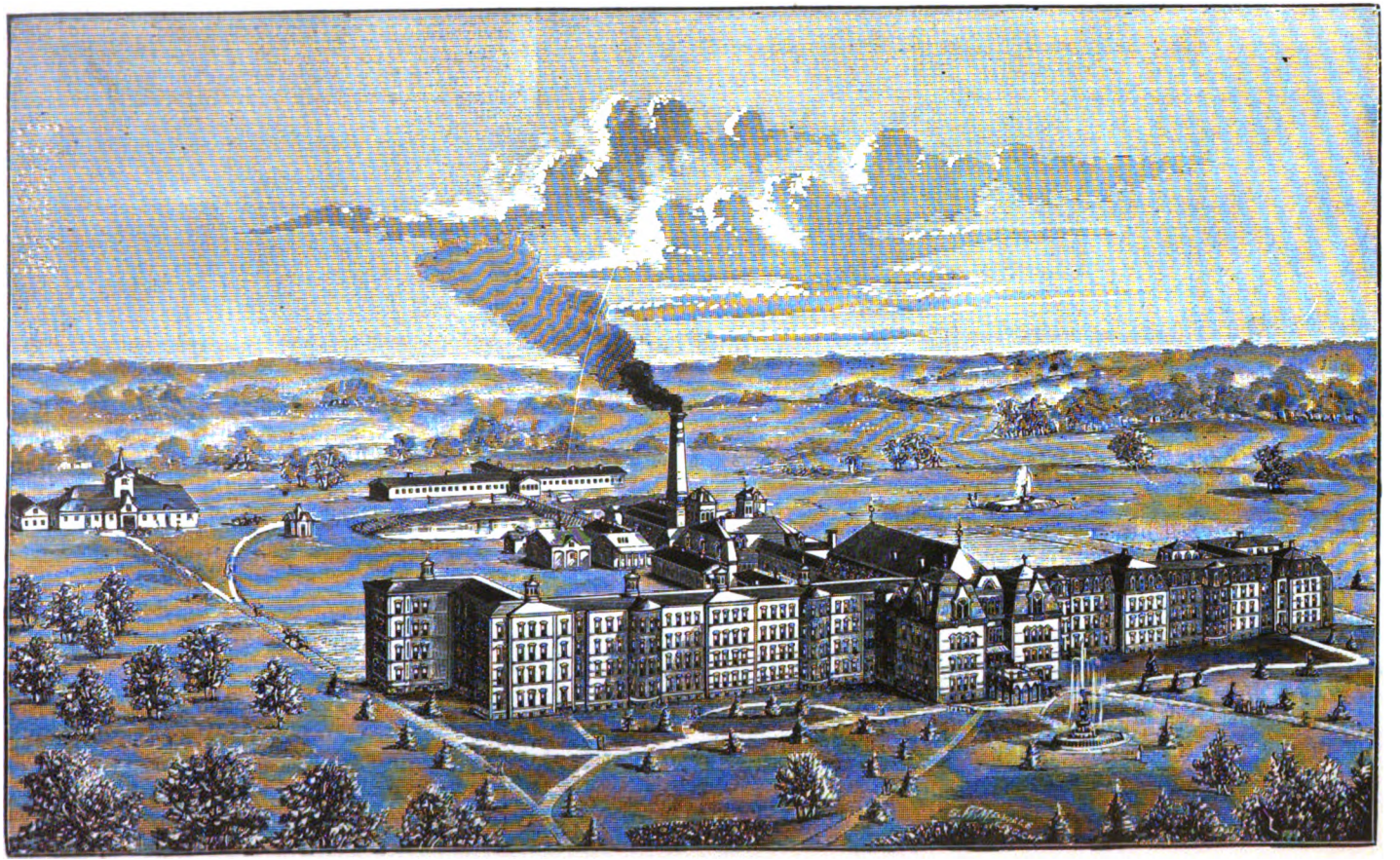

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SOUTHERN HOSPITAL FOR THE INSANE, AT ANNA, ILLS.

This institution was organized under an act of the Legislature, passed in 1869. One wing and the domestic department were constructed and occupied for hospital purposes in December, 1873, under the administration of a Board of Trustees and Dr. A. T. Barnes, as Superintendent.

The centre building was erected in 1874 and occupied in 1875. It is very large, probably one of the largest in this country.

Dr. Tucker, in his "Lunacy in Many Lands," says of this building: "The centre block, which projects from a straight line of the main building, has a handsome portico in front, over the principal entrance. The ground floor is used for offices, visiting rooms, dispensary, and also the Trustees' rooms, all very handsomely furnished. The vestibule (lobby) from the front hall is the handsomest I have seen. It has splendid cast-iron ornamental stairways extending on either side of the wall, right through up to the fourth story."

The second or south wing was completed and occupied in 1877, In July, 1878, Dr. Barnes resigned the position of Superintendent, and in August following, Dr. Horace Wardner was elected to fill the vacancy.

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The hospital at this time had the capacity for the accommodation of 485 patients.

On April 19th, 1881, about one o'clock in the morning, the north wing was discovered to be on fire, and was completely burned out. The Legislature was in session at the time, and an appropriation was at once passed for the reconstruction of the wing, also to provide temporary accommodations for the patients during the rebuilding. In February, 1882, the reconstructed wing was completed and occupied. The defects in the plan of the old wing were remedied, and many improvements introduced.

In 1883 an addition was made to the north wing to accommodate the more excited and violent patients, which has been a great benefit, from the fact that they can now be so far removed from the main body of the patients that their noise causes but little disturbance.

The temporary barracks, which were erected for the accommodation of the patients after the fire, have been fitted up and are in use for the accommodation of the more demented and helpless class. This being a one-story building the patients have free access to the airing court at the rear, which affords them much pleasure.

The hospital now has the capacity for the accommodation of 635 patients, and it is all the time full, and often crowded.

There are 556 acres of land, all in one body, belonging to the institution.

On this land a herd of cows is kept, that supplies all

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the milk, feed is raised for all the animals, and the principle supply of vegetables for the house.

All the beef used, is slaughtered at the hospital, and a considerable portion of the pork.

The institution is supplied with the Edison system of electric lights.

Dr. Tucker remarks:

"Everything about this hospital bears the stamp of good management. Order and cleanliness are apparent everywhere."

The patients are kept out of doors as much as possible. Those who are incapable of assisting in the work are taken out walking twice a day when the weather will permit. There is one large open ward on the men's side. There is a very fine chapel with Gothic finish, seating about 500 persons. Kindness is the rule in the treatment of the patients, and in all necessary discipline.

The health of this hospital is excellent. The average death rate will not exceed 4½ per cent. per annum.

The following are its Trustees and officers:

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ERRATA.

Page 40, for Senaca, 4th, 6th and 12th lines from top, read *Seneca*.
" 40, " Anthony, 17th line from top, read *Antony*.
" 48, " again, 5th line from bottom, read *against*.
" 48, " wa, 11th line from top, read *was*.
" 66, " Esquiril's, 2d line from top, read *Esquirol's*.
" 66, " physical, 8th line from bottom, read *psychical*
" 67, " in conpos, 3rd line from top, read *non compos*.
" 82, " Vice, 5th line from top, read *vice*.
" 88, " present our readers. 12th line from bottom, read present *to* our readers.
" 90, " soll, 18th line from bottom, read *soil*.
" 93, " cadavre, 8th line from top, read *cadaver*.
" 94, " " 1st " " "
" 95, " " 9th " " "
" 138, " Maudsly, 8th and 14th lines from top, read *Maudsley*.
" 139, " Conuecticut, 2nd line from top, read *Connecticut*.
" 141, Transpose * 23 and ‡ 24 (so that *Report on Causes of Idiocy* will relate to *Dr. Howe* and *not to Dr. Rush*).
" 141, for Poychiatry, 6th line from bottom, read *Psychiatry*.
" 152, " satira, 10th line from bottom, read *sativa*,
" 157, " atology 12th line from top, read *otology*.
" 163, Transpose the word *conscious*, 11th line from bottom, immediately *before* the *word energy* in same line.
" 164. for conclusions, 2d line from bottom, read *conclusion*.
" 165, " cerebum, 8th line from bottom, read *cerebrum*.
" 170, " exceeding, 7th line from top, read *exceedingly*.
" 171, " equilibrum, 2d line from top, read *equilibrium*.
" 171, " egotistic, 12th line from top, read *egoistic*.
" 181, place letter *i* before *ve* at beginning of 1st line.
" 188, leave out "*the*," 2d line from top, and for person read *persons* and for succeeds read *suceced* in same line.
" 206, for estimation, 3d line from bottom, read *regard*.
" 208, " Maudsly, 3d line from bottom, read *Maudsley*.
" 209, " " 9th " top, " "
" 211, " adopt, 6th line from bottom, read *adapt*.
" 315, " unortunates, 3d line from top, read *unfortunates*.
" 361, " Obscene, 6th line from bottom, read *Obscure*.
" 361, " Baptising, 7th line from bottom, read *abortion*.

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INDEX.

PAGE.

Attendants, Brutality of..... 74
" Disabled..... 69
Andrews, J. B., M. D..... 81
Aspects of Druse Case..... 24
Active Members, 78, 107, 202, 204, 338, 341, 377, 379, 482, 488
Authors of Original Articles.....232, 335
Abbott, Austin..... 339
Austria..... 394
America.....388, 396
Alcoholism, 236, 330, 382, 387, 397, 403, 410, 419, 425, 481
Asylum, Southern of Illinois..... 519

Belgian Lunacy Commissioners..... 70
" Society of Mental Medicine, 72
Brutality of Attendants 74
Buttolph, Dr..... 74
Buist, Henry, Esq..... 82
Blandford, Dr.....237, 337
Bryce, Dr. P..... .....327, 386, 451
Blackburn, C. H..... 338
Baker, L. W.....342, 410
Belgium..... 394
" and Insane Criminals..... 473
Bleyer, J. Mount.....425, 444
Bell, Clark, 75, 101, 102, 109, 113, 128, 135, 156, 188, 193, 195, 204, 206, 209, 211, 233, 237, 331, 339, 344, 346, 474, 480
Bach, Albert.....100, 130, 204, 339, 353
Berry, M. Eugenia..... .....103, 215
Books, Journals and Pamphlets Received.....131, 246
British Med. Psychological Association.. 208
Butts, A. C.....339, 350
Banquet, Annual.....344, 383
Britain (Great)..... 392
Best method of Executing Criminals, 425, 442

Case of Mrs. Druse..... 22
Chamberlain, E. W., Esq.....22, 79, 101, 104
Classification of Mental Diseases, 32, 112, 465
Colonial and International Congress of Inebriety 75
Crothers, T. D... ....75, 339, 342
Corresponding Members. 79, 203, 205, 254
Carnochan Dr. J. M.....101, 102, 339, 346
Criminality (Stevenson).....158, 257
Carmen Bellicosum..... 207
Clouston, Dr..... 210
Craig, Hon. Oscar..... 222

PAGE.

Criminal Responsibility of the Insane, 65, 211, 325, 326
Committees..... 333
Clubbing. 336, 379
Chadwick, Edwin..... ... 337
Criminals, Execution of.....398, 442
Commitments of Insane.....
Criminal Jurisprudence..... 451
Channing, Dr. Walter..... 466
Congress of Medical Jurisprudence..... 477

Definitions of Insanity..... 65
" " " by Dr. Abertheny.. 65
" " " John Abercrombie..... 65
" " " Chancellor d'Agnessau..... 65
" " " Benj. Ball..... 66
" " " Dr. Baillarger... 66
" " " Bucknill & Tuke 66
" " " Judge Brewster. 66
" " " Dr. Blandford... 66
" " " Balfour Brown.. 66
" " " Dr. C. L. Dana... 66
" " " Dr. J. C. Shaw.. 66
" " " Lord Hardwick. 67
" " " John H. Packard 67
" " " Thos. K. Cruse, M.D..... 67
" " " W. A. Hammond 67
" " " Jules Morel, M.D 68
" " " T. D. Crothers... 211
" " " A. F. Keener..... 211
" " " J. D. Roberts..... 212
" " " J. A. Wright..... 212
" " " Fred. H. Wines.. 212
" " " Joaquin A. Lebredo..... 213
" " " M. E. Berry..... 215
" " " Ex-Gov. of Mass. 216
" " " Lord Hardwicke. 217
" " " Chancellor Kent. 217
" " " Lord Coke..... 218
" " " Sir John Nicol... 218
" " " Henry F. Buswell..... 218
" " " Mr. Justice Curtis 220
" " " Supreme Court of Conn. (Hosmer, J.)..... 220
" " " Alabama Supreme Court... 221
" " " Mass. Statute.... 221

Digitized by Google

PAGE.

Definitions of Insanity by
" " " C. J. Hornblower 221
" " " C. J. Gibson, of Pa. 221
" " " Supreme Court of Alabama. 323
" " " Hoffbauer 323
" " " Guislain 323
" " " Theo. H. Kellogg 324
" " " Prof. Gilman 324
" " " Noah Webster 324
" " " Thomas' Medical Dict. 325
" " " Dr. Pritchard 325
" " " Knight's Encyclopedia 325
" " " Dr. Burrows 325
" " " Chambers' Encyclopedia 326
" " " Appleton's Encyclopedia 326
" " " Henry M. Bannister 459
" " " James G. Keernan 459
" " " Supreme Court of N. H. 459
" " " Sir Hubert Jonas Furst. 460
" " " Supreme Court of Conn 460
" " " Sir John Nicoll 460
" " " Sir James Mackintosh 461
" " " Rolfe, Justice 461
" " " Simon Fitch 461
" " " Allan McLane Hamilton 462
" " " Henry Maudsley. 462
Druse Case 22, 99
Discussion Medical Legal Soc. 98, 108. 176
Doring, A. J. Dr. 157
Dyett, A. R. 305, 339
Dekrafft, Dr. W. R. 338
Davis, Noah (Judge) 339, 343
Death Penalty 398, 442
Death by Electricity 442
Death, Report of Committee on 442
Diet and Activity 339
Day, Mr. Justice 213
Doremus, Prof. R. O. 444

Elwell, Prof. J. J. 332
Ellinger, Morris 191, 193, 339, 342, 346, 351, 403, 430
Expert Testimony 463, 481, 482
Editorial 65, 211, 323
Extended time for Prize Essays 457
English Judges on Expert Testimony 316
Errata 522

Female Physicians 73
Fernandez, A. M 213
Fischer, Dr. C. S. 334
Foster, Roger, Esq 357

PAGE.

France 392
Falret, Jules 474

Gallard, Jean Th. 83
Guislain, Joseph 124
" " Bust of 124
" " Statue of 128
" " Medals of 288
Grant, Dr. Gabriel 188, 190
Guernsey, R. S. 203, 333
Grannis, E. M. 338
Germany 394

Hourteloup, Emile 82
Heger, P. 82
Hauska, Ferdinand 84
Hypothetical Questions 85
Hardwicke, Lord 217
Hall, Dr. Lucy M. 343, 419
Holcomb, Dr. W. F. 343
Holland 395
Heriditary Effects of Intemperance 445

Intemperance and Insanity 135, 480
Inebriety (Opium) 144
Imbibition of Poison 86, 180, 242
Inebriety, Medical Jurisprudence of, 236, 330, 332, 337, 397, 408, 410. 419, 425, 469
Inebriety, London Congress of
Investigation at Ward's Island. 222
Italy 393
Insane Criminals in Belgium 478
Illinois Southern Hospital for Insane
Ingram, Dr. Frank H. 444
International Medical Congress 226
International Congress of Medical Jurisprudence 397, 471
Insomnia 462

Jewel, Prof. J. S. 83, 155
Journals and Books 118, 243
Jury Trials of Insane before Commitment of Insane 471

Kirkbride, Dr. 19
Kerr, Norman, Dr. 75, 339
Kimball, R. B. 101, 333
Kedzie, Dr. 182
Kallay, Dr. A. 343

Leo, Dr. S. N. 97, 110, 187
Lyddy, D. R. 103
Lebredo, Joaquin G. 218
London and International Congress of Inebriety. 234
Landau, Dr. Wm 333, 339
Lunacy, Statutes 390

Digitized by Google

PAGE.

Mills, Chas. K. M. D.....1, 474
Mechanical Restraints..... 699
Morel, Jules, Dr.....68, 71, 82, 124, 474
Medical Congress..... 71
Miller, George B..... 87
Milne. Dr..... 106
Matthews, Dr.....108, 114
Metlakahtla, Story of..... 120
Magazines.....123, 248
Morel, Dr..... 135
Maudsley, Henry.....138, 208
Moreau, de Tours..... 139
Mann, E. C.....139, 389, 397
MacNish..... 141
Meynert, Theodore..... 141
Magnau, Dr..... 142
Mierzejewski, Dr..... 142
McCracken, Dr. Geo..... 181
Mental and Physical Capacity of Man in Reading Language..... 203
Medico-Legal Society, Aims of..... 385
Medico-Legal Papers, Series 4 and 5, 76, 230, 385
Medico-Legal Society, Growth of..87, 379, 479
" " " of N. Y.—Meetings of, 98, 109, 187, 202, 476
" " " Notices to Members, 97, 117, 474, 475
" " " Active Members, 78, 101. 107, 115, 379
" " " Corresponding Members, 79, 108, 115 .....131, 339
" " " Officers..... 130
" " " Progress of, 72, 228, ...328, 383
" " " of France, 81, 117, ...331
" " " " Mass.,.....239, 389
" " " " Phila., Pa..... 388
" " " " Chicago, Ill. 84, 153, 238, 389, 387, 403, 410, 419, 425, ... 475
Medical Juris. of Inebriety..... 236, 330, 382
" " " by Clark Bell, Esq..... 287
" " " by Norman Kerr, M. D., 299
" " " by A. R. Dyett, Esq..... 305
" " " by C. H. Hughes M. D..... 311
" " " by E. C. Maury, M. D..... 397
" " " by Morris Ellinger, Esq... 403
" " " L. W. Baker, M. D..... 410
" " " by Mrs. M. Louise Thomas..... 415
" " " by Lucy M. Hall, M.D.... 419
" " " Rev. Wm. Tucker, M.D. 445

PAGE.

McMaster, G. H.....206, 252
Mott, Dr..... 235
Mason, Dr..... 339
Medical Examination in Life Insurance, 391
Matthew, Justice..... 219
Medical Experts..... 463
Medico-Legal Journal..... 383

Necrology..... .....82, 83, 378
Needham, Dr..... 208, 341
Nationalizing Med.-Legal Society....384, 470

Orange, Dr..... 69
Opium Inebriety..... 144
O'Dwyer, Dr..... .....339, 348
Officers and Committees.130, 253, 332, 343, 373
Original Articles..... .....1, 134, 257, 397, 479

Prison Labor and Public Utility..... 58
Pensions to Attendants..... 69
Prize Essays.....72, 228, 328, 332, 383, 470
Parrish, Dr. Joseph 75, 342
Periods for Mental Labor..... 80
Privileged Communications..... 85
Parsons, R. L..... 343
Paddock, R. K..... 333
Publications.....76, 130, 386
Progress of the Science..... 388
Portugal..... 396
Personal..... 474
Prison Experiences..... 419
Poisons, Imbibitions of..... 87
Peet, Dr. Isaac Lewis.....99, 112, 339, 342
Portraits of Isaac Ray..... 1
" (Bust) Joseph Guislain..... 124
" Statue " 126
" A. J. Vandepoel..... 134
" G. A. McMaste 252
" Wm. Tuke..... 257
" York Retreat..... 371
" Dr. Horace Wardner..... 379
" Ill. Southern Insane Hospital..... 519
" Dr. John M. Carnochan.....

Recent Legal Decisions.....85, 357, 481
Ray, Isaac, M.D..... 1
" " Portrait of..... 1
Richardson, B. Ward..... 80
Relation of Intemperance to Insanity (Bell) 135
Russell, Ira..... 144
Reese, Prof. John J..... 180
Raynor, Dr.....208, 337
Roberts, J. D..... 212
Renton, A. Wood..... 339
Russia..... 395
Recommendations..... 398

Suicide, Penal Aspects of..... 39
Seaman, L. L., M. D.....58, 108, 113

Digitized by Google

PAGE.

Syria..... 68
State Pension to Attendants..... 69
Subscription to Medico-Legal Paper, 76, 231, 334
Sewage..... 110
Steele, Dr. A. K..... 155
Storer, Dr. A. R..... 283, 338
Somerville, Judge H. M..... 326, 341
Stevenson, Dr. W. G.. 158, 257, 333, 339, 346
Societe de Med. Mentale de Belgium, 72, 82
Socquet, Jules..... 331, 341
Sterne, Simon, Esq..... 337
Scandinavia..... 396
Spain..... 396
South America..... 396
Stillman, Dr. Chas F. 444
Stearns, H. P., M. D..... 465
Shoemaker, J. V..... 452
Sketch of Joseph Guislain..... 124
" A. J. Vandepoel..... 250
" G. H. McMaster..... 252
" Wm. Tuke..... 367
" York Retreat..... 370
" Dr. Horace Wardner,..... 516
" Illinois Southern Asylum..... 519

Toxicological..... 87, 247
Tests of Responsibility for the Insane, 65, 211, 323
Tuke, Wm..... 257, 367, 376
Tucker, Rev. Wm..... 343, 445

PAGE.

Thomas, Mrs. M. Louise..... 343, 425
Thompson, Sir Henry (Diet)..... 218
Transactions Med. Legal Society. 98, 202, 337, 482

Urquhart, Dr..... 337

Vleminck and Francis..... 83
Vaughan, Dr. Victor C..... 98, 183
Vanderpoel, A. J. 134, 250
Vacation Abroad..... 233
Valedictory Address (Dr. Steele)..... 153
Valentine, Dr. F. C..... 333, 339, 361

Whiton, L. C., Esq..... 89, 116, 198
Wright, Amelia..... 102, 334
Welcome, Henry S..... 120
Wines, Dr. Fred. H..... 212
Wright, J. A..... 212
Wards Island Investigation..... 222
Wright, T. L..... 342
Waterman, Dr. S..... 343
Wardner, Dr. Horace..... 379
Winslow, Forbes..... 482

York Retreat..... 370

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